



**Mission:**  
To coordinate, measure, and advocate for high quality home-based support to strengthen all expectant and parenting families so that the children of Los Angeles are healthy, safe, and ready to learn.

# Moving the Needle on Capacity and Efficacy of Home Visiting

## Part 1: The Birth Story of a Collaborative Movement

# Webinar Objectives

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- Introduce the Consortium, its vision and the role of the Data Work Group
- Review the process of how the collaboration chose what would be measured
- Review the description of what and how elements are measured
- Share lessons learned and ongoing successes and challenges
- Review data outcomes



# The Consortium's Birth Story

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- Established in 2012
- Funded by First 5 LA and the LA Partnership for Early Childhood Investment
- Year-long strategic planning process, resulted in 2015-2020 Strategic Plan
- Active volunteer membership meets quarterly, and four topical workgroups meet monthly



# Consortium Mission and Vision

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- **Mission**

- To **coordinate**, **measure** and **advocate** for high quality home-based support to strengthen all expectant and parenting families so that the children of Los Angeles County are healthy, safe and ready to learn.

- **Vision**

- Our children: **Healthy, safe and thriving**
- Our families: **Supported, connected, resilient and self-sufficient**
- Our communities: **Strengthened for generations to come**

- **Tagline**

- Home-based support: **Begin early, impact a lifetime**



# Consortium Network Structure



## Network Structure Los Angeles County Perinatal and Early Childhood Home Visitation Consortium

### Membership

- = Member agencies
- Leaders sign off on the Consortium charter and have authority to commit organizational resources to Consortium
- **Function:** Living out charter and strategic plan; self-governance of Consortium
- Decision-making process: by facilitated consensus; if voting needed, then one member (i.e., organization), one vote
- Examples of decisions: Sign off on changes to charter, annual policy priorities, annual action plans
- Meet quarterly

Updated 8-31-16



### Consortium Coordinator and Facilitator(s)

- = Staff to the Consortium, Workgroups, Coordination Committee (NOT the leader; the facilitative support)
- **Function:** Coordinate and support Consortium activity in alignment with charter and strategic plan; connect workgroups and the whole; anticipate and surface conflict so can be addressed; prep and facilitate meetings, as needed

### Workgroups

- = Representatives of member agencies, at various levels, with interest/capacity/expertise to make the objectives happen
- **Function:** Advance/Update action plans
- Each has 2 Co-Leads who will help keep the work on track and serve on Consortium Coordinating Committee
- Meet monthly or as needed
- Workgroups may evolve over time as Consortium priorities/goals evolve

### Consortium Coordinating Committee

- = Co-Leads of each Workgroup
- **Function:** Coordination and communication across workgroups; manage interdependencies; prep quarterly agendas for Membership

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# Workgroups and Strategic Goals

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- Referrals Workgroup
  - Build working referral pathways among programs
- Best Practices Workgroup
  - Promote well-trained and supported home visitors
- Data Workgroup
  - Collect data to understand, support and demonstrate collective impact
- Advocacy Workgroup
  - Elevate, promote and advocate for quality home visiting
  - Increase funding and partnerships
- Full Consortium Membership
  - Self-govern effectively and impactfully



# Measuring Across Models – Why?

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- **Optimize community impact**
  - Ensure a set of programs that collectively meets our community's needs
  - Identify opportunities to strengthen our impact
  - Inform best use of TA/training/new investments
- **Encourage collaboration and conversation**
  - Identify opportunities to learn across models
- **Aggregate data to tell a story & ensure sustainability**
  - What is the total impact of our work on the people and community we serve together?



# Why collect County-wide data?

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**Consortium members identified this as an area of importance during the strategic planning process:**

- **Objective C:** Pilot, finalize and fully launch headline indicator data collection by year-end 2018
- **Objective D:** Use the headline indicators to **analyze the impact of home visiting services across LA County and to identify strengths and opportunities for county-wide quality improvement** with and consortium input annually from 2018 through 2020





# Why collect County-wide cross-model data?

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Also, the Board of Supervisors' Motion:

“Collect, share, and analyze a standardized and consistent set of outcome data leveraging the Consortium’s LA County Common Indicators Pilot Project.”



## NEEDS OF THE FAMILY



Total Number of Family Needs

**869,104**

Although the exact size of the 0-5 population eligible for home visiting services is difficult to quantify due to overlapping risk categories, we estimate that at least 747,067 LA County children between 0-5 years are eligible for home visiting each year, of whom only about 29,700 receive services, leaving 96% without needed support.



## NUMBER OF HOME VISITING SLOTS



Total Number of Home Visiting Slots Available

**29,739**

\*Includes alcohol



## Background on Indicators

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- As part of the Pew Charitable Trusts' Home Visiting Campaign, they developed a set of common indicators for home visiting programs.
  - Several states and LA County participated in the Pew HV Campaign; many states adopted these indicators and some included them in home visiting legislation.
- The Data Workgroup used these indicators as a starting point and modified them to better suit the LA County context.



# Indicator Development

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In addition to using the Pew indicators, the Workgroup also reviewed and drew upon the following to develop its final indicators:

- MIECHV data reporting requirements
- HEDIS (Healthcare Effectiveness Data and Information Set) measures to reflect our advocacy/funding audience of health plans and hospitals
- LA County HV programs current data collection



## Criteria for the Selection of Indicators

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- Be **universally applicable** across models and programs.
- Be **achievable** by the program rather than aspirational or heavily dependent on the performance of others.
- Resonate with **policymakers** and the **engaged public**.
- Reflect an important policy goal worthy of **public investment**.
- Capitalize on **existing data collection methods**, thereby reducing the burden on local programs.



# Outcome Indicators

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- Breastfeeding
  - Initiation (any and exclusively)
  - 3 months (any and exclusively)
  - 6 months (any and exclusively)
  - 12 months (any only)
- Depression screening (within 3 months of delivery)
  - Prenatally enrolled
  - Postpartum enrolled
- Depression positive screen
- Infant mortality
- Well child visit (completed their last recommended visit)
- Maternal postpartum care (received a postpartum visit 21-56 days after delivery)
- Primary caregiver / mother's insurance
- ER/ED visits
- Child maltreatment (removed from home and placed in out-of-home care)
- Child development
  - Received objective developmental screening
  - Referred to regional center based on screening results
  - Received assessment from regional center
- Prenatal care (received at least 80% of recommended number of prenatal visits)
- Birth control use (family planning method used at most recent visit)



# Descriptive Variables

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- Child Characteristics
  - Low birth weight
  - Pre-term birth
  - Child currently in foster care
- Primary Caregiver Characteristics
  - Age at birth
  - Number of prior births
  - Race/ethnicity
  - Education level
  - Primary language
  - Marital status
  - Zip code
  - Household income
  - WIC enrolled
  - TANF/CalWorks enrolled
  - Child's insurance
  - Other children in the home
- Primary Caregiver Social Characteristics
  - History of incarceration
  - History of DV/IPV
  - Homelessness/housing instability
  - Substance abuse
- Program Service Characteristics
  - Number of home visits
  - Reason for termination
- Program Characteristics
  - Annual number of families/clients served
  - Annual funded program capacity
  - Annual number of referrals
  - Number of home visits
  - Program supervisor to home visitor ratio
  - Average caseload
  - Sources of referrals (into program)
  - Annual number that enroll in services



# The Indicators

Measure	Numerator	Denominator	Source
Breastfeeding-Initiation Any	Number breastfeeding any up to 2 weeks after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 2 weeks.	Modified Early Head Start (EHS)
Breastfeeding-Initiation Exclusively	Number breastfeeding exclusively up to 2 weeks after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 2 weeks.	Modified EHS
Breastfeeding-3 months Any	Number breastfeeding any 3 Months after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 3 Months.	Modified Pew
Breastfeeding-3 months Exclusively	Number breastfeeding exclusively 3 Months after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 3 Months.	Modified Pew
Breastfeeding-6 Months Any	Number breastfeeding any 6 Months after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 6 months.	Modified MIECHV
Breastfeeding-6 Months Exclusively	Number breastfeeding exclusively 6 Months after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 6 months.	Modified MIECHV
Breastfeeding-12 months Any	Number breastfeeding any 12 Months after birth	Number of women enrolled in program within 2 weeks of birth and in program for at least 12 months.	LACPECHVC
Depression- prenatally enrolled	Number receiving depression screening within 3 months of delivery	Number of women enrolled prenatally who remain in program at least 3 months after birth.	MIECHV
Depression- postpartum enrolled	Number receiving depression screening within 3 months of enrollment	Number of women enrolled postpartum who remain in program at least 3 months after birth.	MIECHV
Depression - positive screen	Number of postpartum women who scored positive on a validated scale for depression (5+ for PHQ-9, 10+ for Edinburgh, 13+ for BDI-II, 59+ for PDSS)	Postpartum women screened within 3 months delivery (for prenatally enrolled) or enrollment (for postpartum enrolled).	LACPECHVC





# The Indicators, continued

Measure	Numerator	Denominator	Source
Well Child Visit	Number of children enrolled in home visiting services who completed their last recommended well child visit based on AAP	Number of children enrolled in home visiting services.	MIECHV/PEW (Also a HEDIS measure, only collected at 15 mos.)
Post-partum care	Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 21-56 days of delivery	Number of mothers who enrolled in home visiting prenatally or within 20 days after delivery and remained enrolled for at least 56 days after delivery.	HEDIS/modified MIECHV
Primary caregiver/mother's insurance	Number of women enrolled in home visiting services who have health insurance (includes: public, Medicaid, Healthy LA, Family PACT, and Private) from 2 to 6 months postpartum.	Number of women enrolled in home visiting services for at least six months postpartum.	Modified MIECHV/Pew
ED/ER visit	Number of children enrolled in home visiting services who had any emergency room visit in prior six months.	Number of children enrolled in home visiting services for at least six months.	Amended PEW (Also a CHIPRA measure)
Child Maltreatment	Number of index children enrolled in home visiting services who were removed from the home and placed in out-of-home care after enrollment date.	Number of children enrolled in home visiting services for at least six months.	LACPECHV



# The Indicators, continued

Measure	Numerator	Denominator	Source
Child Development 1	Number of children enrolled in home visiting services who received objective developmental screen.	Number of children enrolled in home visiting services for the amount of time required to complete one screening according to program model.*	LACPECHVC
Child Development 2	Number of children enrolled in home visiting services who were referred to a regional center for a developmental assessment.	Number of children enrolled in home visiting services who received objective developmental screen and whose screening results indicate need for referral.	LACPECHVC
Child Development 3	Number of children enrolled in home visiting services who received a development assessment from a regional center.	Number of children enrolled in home visiting services who were referred to a regional center.	LACPECHVC
Prenatal Care	Postpartum mothers who received at least 80% of the recommended number of prenatal visits from their time of enrollment to the birth of their babies	Postpartum mothers in that cohort who enrolled prenatally and delivered while receiving services.	Massachusetts' MIECHV (HEDIS, only asks for one first tri visit)
Birth Control Use	Number of enrolled postpartum women who used family planning methods at most recent visit	Number of enrolled postpartum women.	District of Columbia's MIECHV
*For EHS this is 45 days, for Welcome Baby 3 months,			



# Data Collection Pilot Goals

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- To see how hard/easy it is for sites to collect needed data
- To see whether data collected from different models/data systems can be combined or compared at all
- To see if any interesting stories can be gleamed from cutting the indicators by different client characteristics
- To see if the individual indicators still seem interesting and useful once presented – do indicators measure what they were intended to?



# Breastfeeding Initiation (Any)

Breastfeeding Initiation (Any): Number of women who breastfeed any amount up to two weeks after birth/Number of women enrolled in program within 2 weeks of birth and in program for at least two weeks

## 2016-2017 Breastfeeding Initiation (Any) Data

	Numerator	Denominator	Percent
Healthy Families America	415	461	90.0%
Healthy Start	85	117	72.6%
Parents as Teachers	436	469	92.9%
Welcome Baby	12,404	13,483	91.9%



# Breastfeeding Initiation (Exclusive)

Breastfeeding Initiation (Exclusive): Number of women who breastfeed exclusively up to two weeks after birth/Number of women enrolled in program within 2 weeks of birth and in program for at least two weeks.

## 2016-2017 Breastfeeding Initiation (Exclusive) Data

	Numerator	Denominator	Percent
Healthy Families America	259	461	56.1%
Healthy Start	N/A	N/A	N/A
Parents as Teachers	258	469	55.0%
Welcome Baby	8,015	13,483	59.4%



# Depression Screen (Postpartum Enrolled)

Depression Screen (Postpartum Enrolled): Number of women receiving depression screening within 3 months of enrollment/Number of women enrolled postpartum who received at least one home visit within 3 months after enrollment

## 2016-2017 Depression Screen (Postpartum Enrolled) Data

	Numerator	Denominator	Percent
Healthy Families America	4,089	4,106	99.6%
Healthy Start	162	162	100%
Parents as Teachers	4,176	4,332	98.3%
Welcome Baby	10,296	10,826	95.1%



# Well-Child Visit

Well-Child Visit: Number of children enrolled in home visiting services who completed their last recommended Well-Child visit based on AAP schedule/Number of children enrolled in home visiting services

## 2016-2017 Well-Child Visit Data

	Numerator	Denominator	Percent
Healthy Families America	471	591	79.6%
Healthy Start	364	409	88.9%
Parents as Teachers	232	280	82.8%
Welcome Baby	9,733	10,826	89.9%



# Child Maltreatment

Child Maltreatment: Number of index children enrolled in home visiting services who were removed from the home and placed in out-of-home care after enrollment date/Number of children enrolled in home visiting services for at least six months

## 2016-2017 Child Maltreatment Data

	Numerator	Denominator	Percent
Healthy Families America	3	591	0.51%
Healthy Start	0	158	0%
Parents as Teachers	3	280	1.07%
Welcome Baby	20	10,826	0.18%





# Child Development 1

Child Development 1: Number of children enrolled in home visiting services who received objective developmental/ Number of children enrolled in home visiting services for the amount of time required to complete one screening according to program model.\*

## 2016-2017 Child Development 1 Data

	Numerator	Denominator	Percent
Healthy Families America	1,711	1,770	96.7%
Healthy Start	347	347	100%
Parents as Teachers	1,644	1,770	92.88%
Welcome Baby	7,020	7,381	95.11%



# Data Considerations, Challenges and Caveats

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- Some data are self-reported, others are program-administered, others are externally validated
- No standardized check for data quality
- Data are collected at different points in time depending on program
- Programs have varying intensity, duration, and intended outcomes
- Descriptive data (in pilot collection phase now!) for contextualizing
- Program participation is currently voluntary; collecting all data is currently a challenge
- Timely process; needs dedicated staff time
- Differing funders reporting needs



# Next Steps...

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- Continue to collect data!
  - Encourage more home visiting models and organizations to participate
    - Partnerships for Families
    - Nurse Family Partnership
- Visualization dashboards now on our website!
  - Includes county comparison data
- Webinar Part 2 and 3!
  - Updated data presentation
  - Descriptive data



# Data Visualization Reports are Online!

## Demographic data is on the way...

- Visualization dashboards now on our website!
  - Infant mortality
  - Depression
  - Breastfeeding
  - Postpartum health care
  - Well-child visits and insurance coverage
  - More to come...
- Demographic data collection in pilot analysis phase



# Contact Information

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- Consortium website
  - [www.Homevisitingla.org](http://www.Homevisitingla.org)
    - Data-Driven Home Visitation Webpage
      - Visualization Dashboards
    - Home Visitation eDirectory
    - Training, events and resources
    - Research, resources and referrals
- For more information or inquiries, please contact the LACPECHVC Coordinator:
  - Email: [LACPECHVC\\_Coordinator@labestbabies.org](mailto:LACPECHVC_Coordinator@labestbabies.org)
  - Phone: (213) 378-1967

