

Los Angeles County Perinatal and Early Childhood Home Visitation Consortium
Benchmark Data Comparison Charts
Post-Partum Care

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The Los Angeles County Perinatal and Early Childhood Home Visitation Consortium Program (LACPECHVC) was created in an effort to promote common performance measures across a variety of home visiting programs in a state or region. As part of the Pew Charitable Trusts' Home Visiting Data for Performance Initiative, the Consortium's Data Workgroup Participants have selected a set of outcome and process measures that were intended to:

- Be universally applicable across models and programs (with the expectation of prenatal or postnatal enrollment)
- 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
- Incorporate available state administrative data

The Consortium Members' goals in collecting aggregate data were to:

- Identify commonality among programs (*both outcome and process*)
- Explain what home visiting does across the County
- Identify areas of strength and opportunities for improvement

Additionally, members agreed to aggregate data at the "model" level, rather than at the organizational level as it is important to recognize that each home visiting program varies in approach, dosage, and program goals. Below is a list of home visiting models that provided data in reference to post-partum care:

- Welcome Baby (WB)
- Healthy Families America (HFA)
- Parents as Teachers (PAT)
- CCRC Early Head Start (CCRC EHS)
- Partnerships for Families (PFF)
- Healthy Start (HS)
- Nurse Family Partnership (NFP)

This Benchmark Comparison Chart Report as presented by the Data Workgroup, provides individual chart reports for LACPECHVC'S Programmatic Data [FY 18-19] with charts that display differences between various home visiting groups and county level data. The county level data (Benchmark Data) that is presented is designed to provide a comparison to the Programmatic Data; for reference please refer to the 'LACPECHVC Outcome Measure for FY 18-19'.

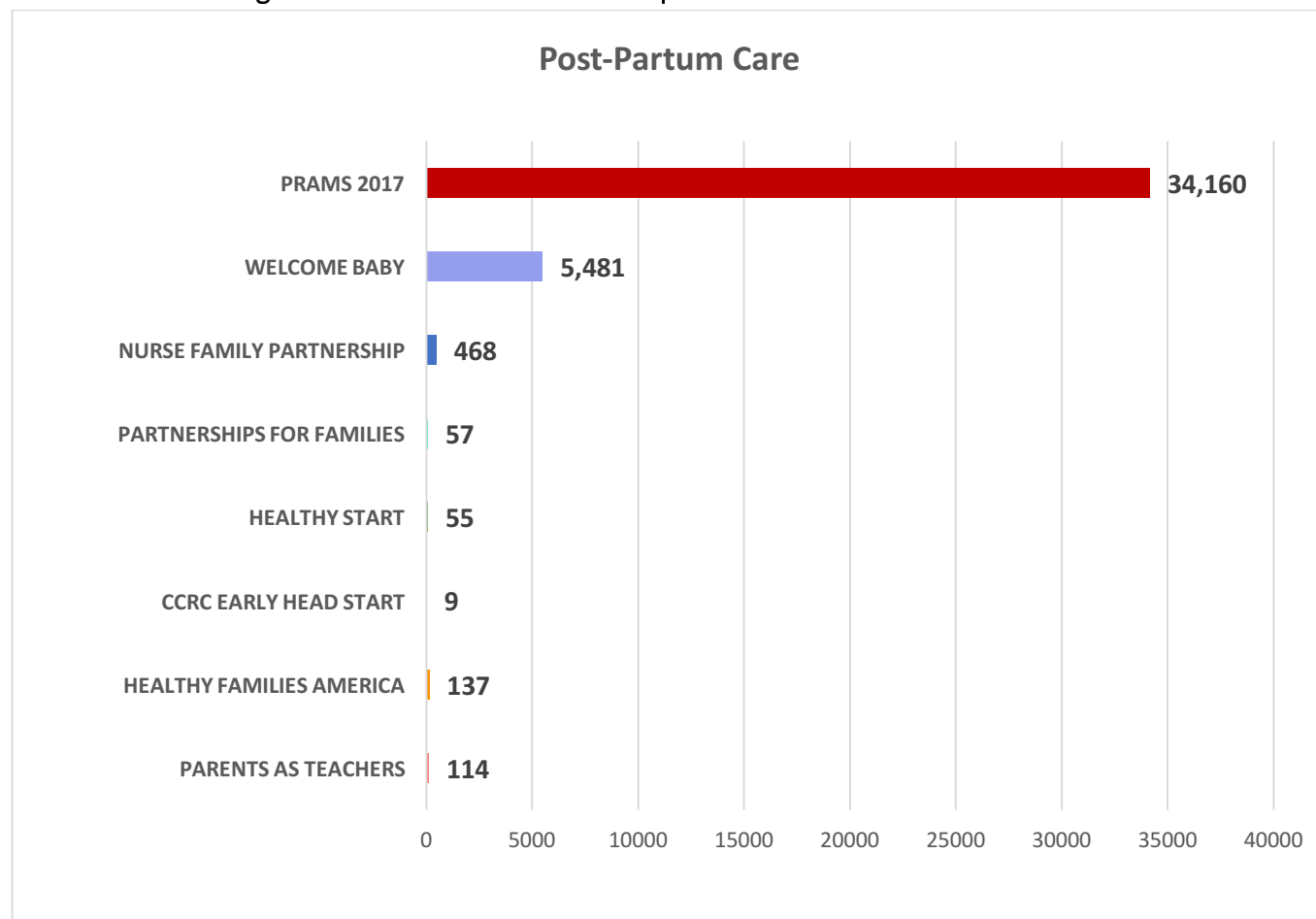
Benchmark county/state/national level data is provided as a comparison to LACPECHVC's Programmatic data and may differ in variable definition and measurement of the numerator and denominator. Additionally, program models do not have the same outcomes and deliverables and therefore may have differing or non-reportable data.

POST-PARTUM CARE

This report compares programmatic data and county level data for the 'Post-Partum Care' variable. **Section A** breaks down sample sizes for programmatic and benchmark data and provides the benchmark data source(s). **Section B** displays comparison outcomes and provides variable definitions.

A. SAMPLE SIZES

1. LACPECHVC Programs and Benchmark Data Sample Sizes:

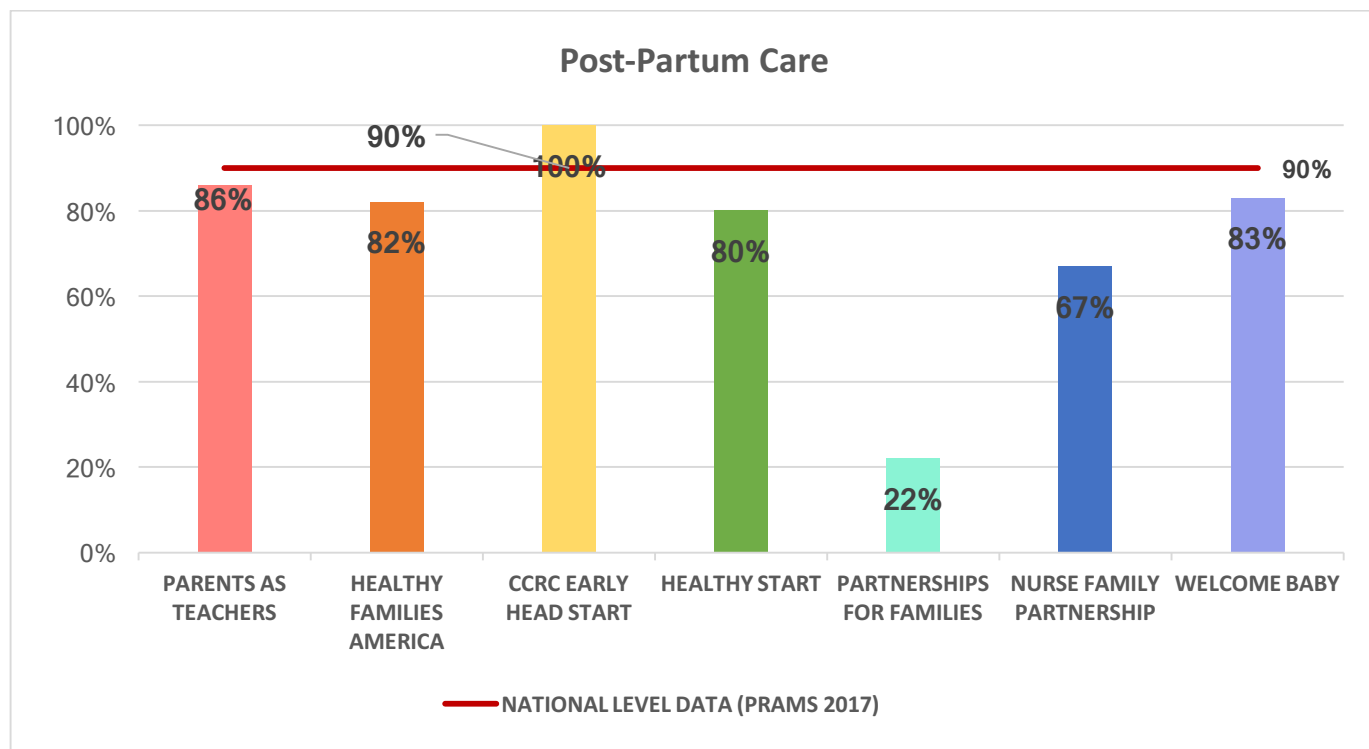


2. Benchmark Data Source(s):

- Pregnancy Risk Assessment Monitoring System (PRAMS) 2016-2017.

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B. COMPARISON OUTCOMES



Variables are defined as:

1. LACPECHVC Program Variable Definitions:

- **Numerator:** Number of mothers enrolled in a home visiting program prenatally or within 30 days after discharge who received a postpartum visit with a healthcare provider within 14-56 days of delivery who were enrolled for at least 56 days.
- **Denominator:** Number of mothers who enrolled in a home visiting program prenatally or within 30 days after discharge and remained enrolled for at least 56 days.

2. Benchmark Data Variable Definitions:

- **Pregnancy Risk Assessment Monitoring System (PRAMS) 2016-2017:** defines the numerator as 'the number of participants who had maternal postpartum check-up' and the denominator as the 'total number of participants in 2017'.

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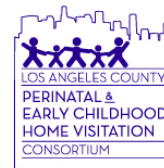


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POST-PARTUM CARE VARIABLE SUMMARY STATISTICS

INDICATOR	PARENTS AS TEACHERS	HEALTHY FAMILIES AMERICA	CCRC EARLY HEAD START	HEALTHY START	PARTNERSHIPS FOR FAMILIES	NURSE FAMILY PARTNERSHIP	WELCOME BABY	BENCHMARK REPORT NAME & SOURCE	BENCHMARK MEASURE
Post-partum Care <i>Numerator:</i> Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a health care provided within 21-56 days of delivery <i>Denominator:</i> 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.	(114/133) =86%	(137/168) =82%	(9/9) =100%	(55/69) =80%	(57/256) =22%	(468/702) =67%* * Likely an undercount due to change of forms used to data collection of indicator at the beginning of the fiscal year	(5,481/6,574) =83%	Prevalence of Selected Maternal and Child Health Indicators for ALL PRAMS Sites, Pregnancy Risk Assessment Monitoring System (PRAMS), 2016-2017	90%

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Discussion:

The post-partum care data analyzed in this report indicates that the Los Angeles County Perinatal and Early Childhood Home Visitation Consortium programmatic data for CCRC EHS exceeds the national-level data, whereas HFA, PAT, HS, PFF, NFP, and WB were below the national-level data. This suggests that the benchmark data may not be a good comparison against the LACPECHVC programmatic data.

Limitations and Recommendations:

Such discrepancies in data may be the result of different demographics, variable definitions, sample sizes, outcomes, and deliverables within each program model. Recommendations for the LACPECHVC programs are to continue to follow model guidelines and strive to increase post-partum care. It is also important to note that while CCRC EHS exceeded the national-level data, that their sample size is small and may not be an accurate and reliable representation. Additionally, moving forward, it may be beneficial to aggregate LACPECHVC data to create a baseline for post-partum care in Los Angeles County to compare against county-level data rather than national-level data.

General suggestions for the future: break down data by SPA level, compare demographic data to spot differences between models, clearly identify if model definitions do not compare to the LACPECHVC definitions, and collaborate to create universal definitions and measurements for post-partum care in order to have more reliable and comparative data.

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