



# FAMILY FOUNDATIONS HOME VISITING PROGRAM

## 2016 ANNUAL REPORT

*Released March 2017*

### **What is the Family Foundations Home Visiting Program?**

Wisconsin's Family Foundations Home Visiting (FFHV) Program provides pregnant women, children and families with voluntary, in-home supports and mentoring through their children's first years of life. Home visitors are highly trained professionals who partner with families to support healthy pregnancy and positive birth outcomes, reduce the risks of child injury, abuse, and neglect, and promote child growth, development, and school readiness. While all families benefit from support, the FFHV Program prioritizes services to families for whom access to resources is most critical, including families experiencing poverty and other risk factors. Early childhood programs, like home visiting, that focus on building language, motor, cognitive, and social-emotional skills have been shown to have significant long-term benefits. When these types of interventions are targeted to economically disadvantaged families as part of a comprehensive birth-to-five early childhood system, they can deliver a return on investment as high as 13% per year.<sup>1</sup>

The FFHV Program is funded through a combination of federal and state dollars. Currently, the program is supported by \$8.6 million from the federal Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV), \$0.8 million in Temporary Assistance for Needy Families (TANF) funds and \$1.0 million in state General Purpose Revenue (GPR), for a total of \$10.4 million per year.

<sup>1</sup> García, Heckman, Leaf, & Prados (2016). *The Life-cycle Benefits of an Influential Early Childhood Program*. HCEO Working Paper. [www.heckmanequation.org](http://www.heckmanequation.org).

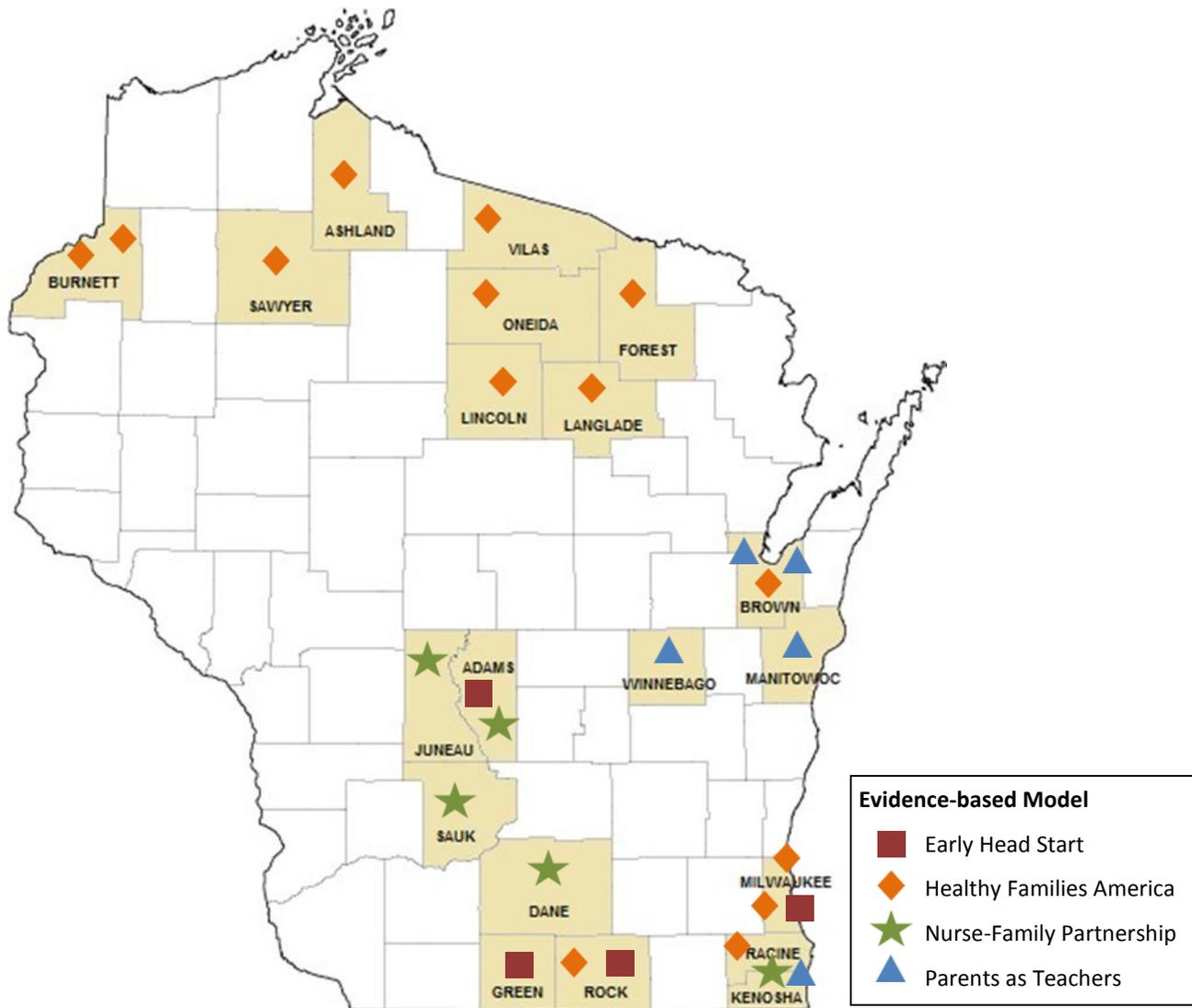
#### **Our Evidence-based Approach**

*The FFHV Program applies an evidence-based approach to home visiting. Funds support the implementation of four nationally recognized models with proven results for children and families: Early Head Start, Healthy Families America, Nurse-Family Partnership, and Parents as Teachers. These models provide high-quality training for professionals, evidence-informed curricula, and monitoring, reporting, and accreditation processes that ensure local programs are implementing critical service elements with fidelity to research and best practices. The use of an evidence-based approach results in better outcomes for families, which means cost savings for communities in the long run.*

## Where are FFHV services located?

In 2011, the FFHV Program selected sites for implementation through a Request for Proposal (RFP) process that prioritized organizational capacity, community need, and an evidence-based approach. Twenty two programs covering 15 counties and 4 tribes were funded through the initial RFP. In late 2015, FFHV expanded its reach to include 26 programs providing services to 20 counties and 5 tribes (see Figure 1). These programs are based in city and county health and human services departments, tribal organizations, and non-profit agencies. After 5 years of implementation, the FFHV Program released a new RFP to identify program sites for 2017. Selected sites include a mixture of previously funded programs and those new to the FFHV Program.

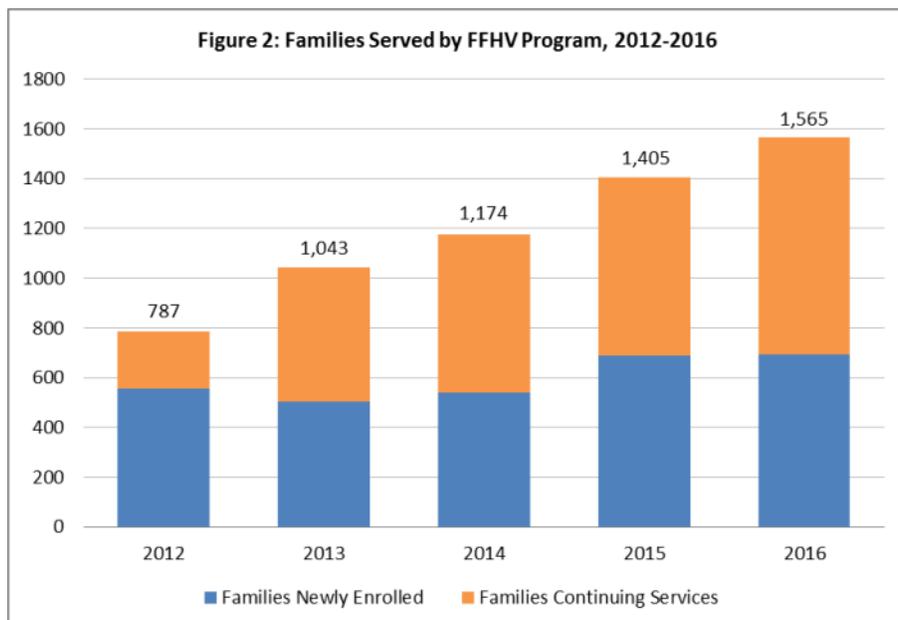
Figure 1: 2016 Family Foundations Home Visiting Program Sites



## 2016 HIGHLIGHTS AND ACCOMPLISHMENTS

### Program Services and Key Outcomes

In 2016, the FFHV Program provided services to 1,565 families. With the influx of federal funding through MIECHV, the number of families receiving home visiting services in Wisconsin has steadily increased since 2012 (see Figure 2). Home visitors completed a total of 23,662 home visits with families in 2016. The FFHV Program strives to target home visiting services to families who will



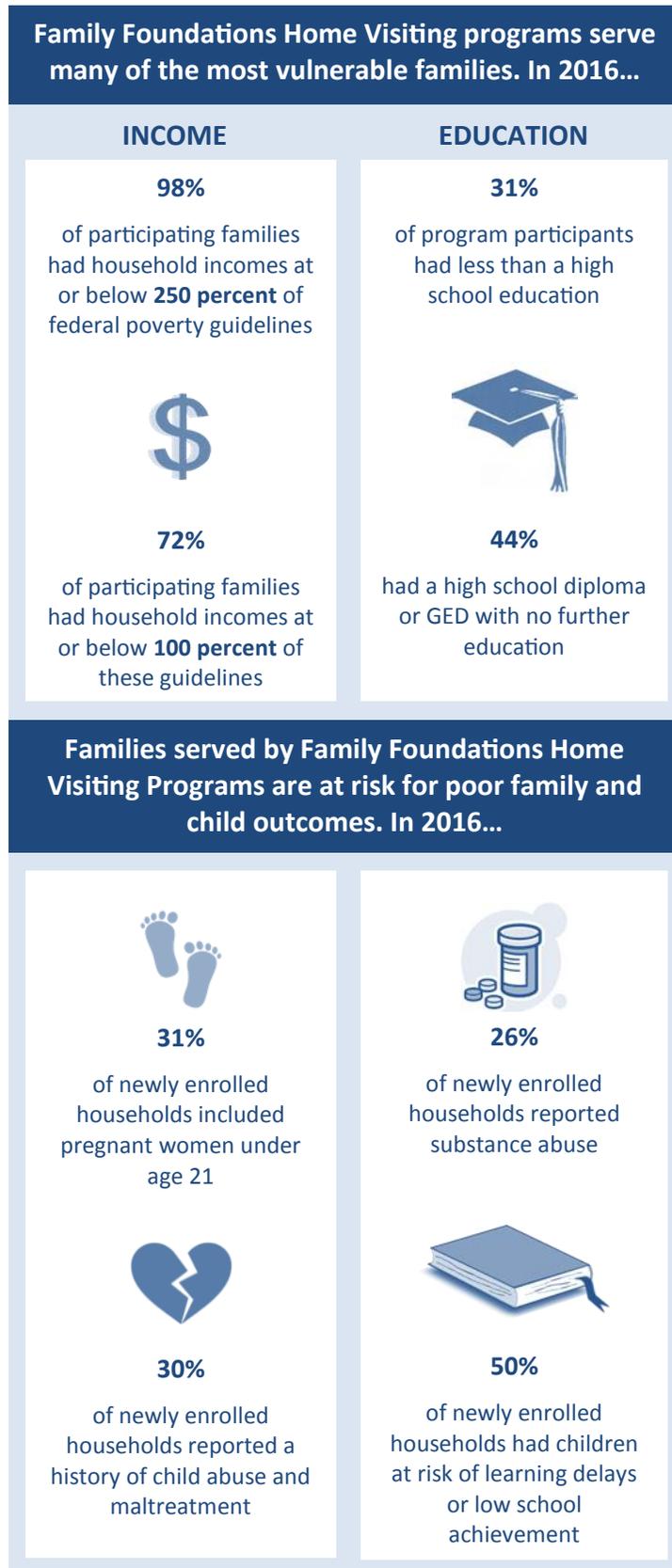
benefit most from support and resources. Guided by research that indicates starting services prenatally yields more positive outcomes for families, funded programs have a goal of enrolling at least 75 percent of women during pregnancy. In 2016, 70 percent of new enrollees statewide were pregnant women. In addition, the FFHV Program continues to serve many of Wisconsin's most vulnerable families, including those experiencing poverty, low education levels,

substance abuse, and child maltreatment (see Figure 3). Two-thirds of families that enrolled in home visiting services in 2016 reported experiencing 3 or more of these risk factors at the time they entered services.

#### PROGRAM SPOTLIGHT: ALEAH'S STORY

*The Kenosha County Division of Health serves more than 200 pregnant women and families each year through home visiting programs. It provides a Nurse-Family Partnership program for young, first-time moms and a Parents as Teachers program for other at-risk families in their community. All services are provided by trained nurses who bring extensive knowledge of maternal and child health, growth and development, and community resources. Aleah is a participant in the Kenosha Partners Parents as Teachers program whose young child was not meeting benchmarks for gross motor development when assessed by the nurse home visitor. The home visitor noticed that Aleah was extremely cautious with her daughter and rarely placed her on the floor to play. The home visitor spent several visits working with Aleah to share information about the importance of floor time and modeling how to support her daughter to safely explore her environment. Soon, Aleah was placing her daughter on the floor for play each day. The child quickly thrived, going from rarely moving to rolling, sitting, standing, and walking all within a few weeks' time.*

**Figure 3: Risk Factors of Families Served by FFHV Program**



**PROGRAM SPOTLIGHT:  
RESPONDING TO THE OPIOID CRISIS**

*Like many Wisconsin communities, Sauk County has seen a recent rise in the use of heroin, opioids, and other substances. Recognizing the impact of substance abuse on families with young children, the **Nurse-Family Partnership Program at the Sauk County Health Department** has joined with the Sauk County Jail, Criminal Justice Coordinating Council, and UW Extension to offer support to families experiencing incarceration for drug-related and other offenses. As part of this partnership, family members receive referrals to home visiting and other area resources when the parent of a young child is incarcerated. In addition, nurse home visitors are able to meet with pregnant clients in the jail to plan for the baby's arrival, learn about infant care, and discuss issues like Neonatal Abstinence Syndrome and withdrawal when a woman is dealing with addiction while pregnant. As a result of the advocacy of the Nurse-Family Partnership Program, the jail has modified policies to ensure better care for pregnant women and to allow for breastfeeding and bonding immediately after birth when a woman is in custody. Nurse home visitors are also available to work with families participating in the Sauk County Drug Court, which offers treatment resources and an alternative to jail for drug-related offenses, and have been recognized as an important partner and resource in the community's response to rising opioid use.*

In order to address the significant challenges facing parents and their children, home visitors partner with families to share information, model positive parenting practices, screen and assess for areas of needed support, and offer connections to local community resources and other available assistance. In 2016, the FFHV Program accomplished the following:

Family Health	School Readiness	Positive Parenting
<b>92%</b> of infants received all or most of their recommended well-child visits with a physician	<b>96%</b> of children were screened for developmental delays by their home visitor before their first birthday	<b>76%</b> of families completed an assessment of parenting behaviors with their home visitor
<b>80%</b> of infants were breastfed some amount in their first 6 months of life	<b>67%</b> of children were on track developmentally at the time they turned 8 months old	<b>75%</b> of caregivers were screened by their home visitors for parenting stress
<b>72%</b> of women were screened by their home visitor for risk of postpartum depression within 60 days of giving birth	<b>90%</b> of children identified as at risk for a delay were referred by their home visitor for additional services	<b>75%</b> of families received training from their home visitor on preventing child injuries
<b>72%</b> of families received information about birth spacing from their home visitor prior to the birth of their child	<b>100%</b> of children with a potential social-emotional concern were referred by their home visitor for additional services	<b>Less than 6 %</b> of infants had any injury that required medical treatment by the time they reached 12 months of age

## Professional Development for the Home Visiting Workforce

The FFHV Program provides professional development training and model-based implementation assistance to local home visiting programs through the Milwaukee Child Welfare Partnership at the University of Wisconsin-Milwaukee. In 2016:

- **1,312** individuals participated in professional development training
- **31** training sessions were offered, covering topics including foundational skills, early childhood development, substance abuse, domestic violence, life skills progression, adverse childhood experiences, perinatal depression, and reflective supervision
- **358** professionals attended the annual Fulfilling the Promise Conference for home visitors, parent educators, and others who work with families with young children
- **4** regional Communities of Practice were convened to facilitate collaboration and sharing of best practices across home visiting programs
- **5** Wisconsin programs achieved accreditation from the Healthy Families America model
- **2** new programs completed affiliation with the Parents as Teachers model and began services to families
- **2** in-state trainers were identified and supported through a train-the-trainer process to offer professional development for the Healthy Families America model at a reduced cost to WI programs

### PROGRAM SPOTLIGHT: SYDNEY'S STORY

*The Mino Maajisewin Home Visitation Program serves pregnant women and families in the Lac Courte Oreilles community. Like other FFHV programs, Mino Maajisewin targets families facing multiple risk factors and works to support those families in achieving their goals. Sydney is a high school student with a one year old child who enrolled in Mino Maajisewin determined to overcome the challenges faced by many teen parents. As a child, Sydney lived in a home where she witnessed substance abuse and domestic violence. Sydney herself had been emotionally and physically abused by the father of her baby and exhibited signs of depression when screened by her home visitor. Despite these challenges and with the support of the home visiting program, Sydney is currently working two jobs and on track to graduate high school with honors. She has ended her abusive relationship, and in an effort to decrease her symptoms of depression, Sydney is currently working on a goal plan with her home visitor to increase "Mommy and Baby Time," which allows Sydney to focus on having fun with her child.*

Program dollars also support scholarships for experienced home visiting professionals to pursue more advanced training. In 2016, a number of home visitors received scholarships for advanced training in breastfeeding support. In addition, 10 home visitors across the state utilized scholarship funds to complete the year-long Capstone Certificate Program in Infant, Early Childhood, and Family Mental Health at the University of Wisconsin. This program offers education and training in social-emotional development, healthy attachment, and relationship-based interventions and practices.

Through a partnership with the Wisconsin Alliance for Infant Mental Health, FFHV Program sites also receive support from consultants trained in infant and early childhood mental health. The consultants facilitate monthly groups at each program site with the goal of building home visitors' professional capacity to promote positive parent-child relationships while learning to identify and respond appropriately to social, emotional, and behavioral challenges in infants and young children. In 2016, 13 consultants led groups at 19 program sites.

## Promoting a Culture of Quality

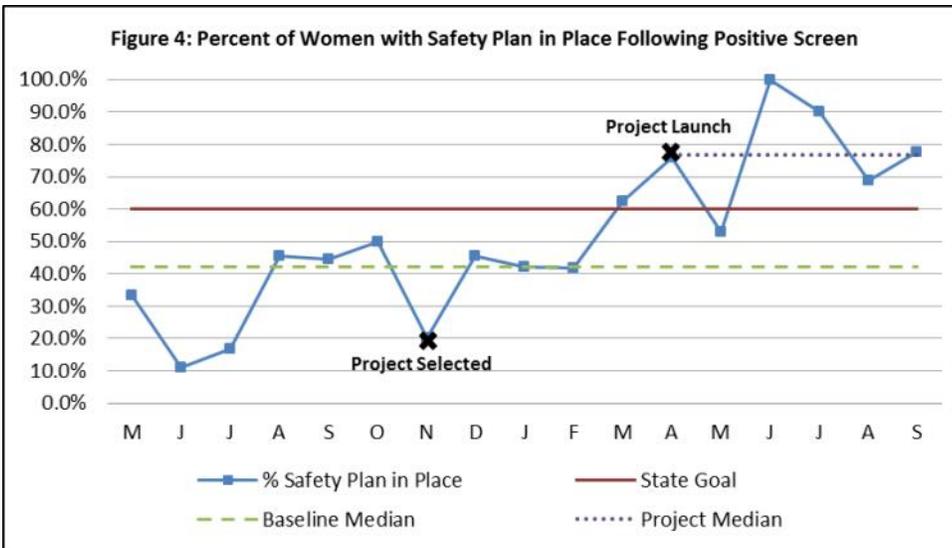
The FFHV Program is committed to building a culture of quality that supports promotion of best practices, implementation of home visiting services with fidelity to the evidence-based models, and positive outcomes for families. To support quality services, the FFHV Program dedicates important resources to data collection, continuous quality improvement, and ongoing evaluation of program services.

### **Data Collection**

In 2016, the FFHV Program developed a new data system that will allow home visiting programs across the state to collect key family information, complete and score a variety of health and development focused screens and assessments, and monitor program progress on key performance measures. Home visitors are able to access the system directly in the home via mobile devices, contributing to increased completion and accuracy of required data collection.

## Continuous Quality Improvement

Local home visiting programs participate in a statewide Continuous Quality Improvement team. Supported by the FFHV Program, the team selects improvement projects and sets project aims shared by multiple programs to promote collaborative learning and the spread of ideas that work. Programs



test out ideas at their local sites using plan-do-study-act cycles and report back to the full team each month. In 2016, the statewide team completed projects focused on (1) improving program retention rates and (2) increasing both the percent of women screened for domestic violence and the percent of women who develop safety plans with their

home visitors following a positive screen. Statewide, the team met or exceeded the projects' aims in several areas. As shown in Figure 4, safety plan completion rates exhibited a change in the desired direction, exceeding the baseline median of 42 percent in every month of the project and ending above the team's goal of 60 percent.

### PROGRAM SPOTLIGHT: IMPROVING SCREENING FOR DOMESTIC VIOLENCE

*In 2016, the FFHV Program completed a statewide improvement project aimed at raising the rates at which women are screened for domestic violence and work with their home visitors to develop safety plans when needed. Local home visiting programs that participated in the project shared what they learned:*

**Juneau County Nurse-Family Partnership Program:** *Participating in the project really increased our awareness of issues surrounding domestic abuse, increased our confidence level with screening, and strengthened our ability to develop safety plans with families. Home visitors learned that the timing of initiating the screening was important and unique to each staff-client relationship.*

**Parent Connection in Winnebago County:** *We created a worksheet to remind home visitors to develop a safety plan whenever women screened positive for signs of abuse. Many home visitors were not discussing safety plans with women who reported that they were no longer in contact with the abuser, but we learned that best practice means completing a safety plan even in this situation. This resulted in great discussion among staff members, which gave our program a better understanding of the different dynamics of abuse and how complicated each individual's situation can be.*

**Adams County Nurse-Family Partnership Program:** *We learned how important it is to know about local resources related to domestic violence services and improve our communication with those agencies in order to provide the best opportunity for families to receive those services.*

## Evaluation

The FFHV Program partners with researchers from the University of Wisconsin-Milwaukee to support program evaluation. 2016 saw the continuation of two major research efforts. The Healthy Families Study, launched in 2014, is investigating the impacts of home visiting services through a randomized control trial at the Milwaukee Health Department. Parent and child outcomes are assessed over a 15 month period for families randomly assigned to either a multi-year, evidence-based home visiting program or a shorter-term, home-based intervention; a third group is comprised of families that declined to participate in services. Data collection for the Healthy Families Study is scheduled to continue through 2017 with results available in 2018.

The Families and Children Thriving (FACT) Study, launched in 2015, seeks to engage all families receiving services from the FFHV Program through completion of a survey focused on family health, well-being, and service experiences.

Responses will be used to examine factors that influence parents' level of participation and engagement in home visiting services and combined with data collected from home visitors to better understand the role of the staff-client relationship. As of the end of 2016, nearly 900 families have completed a FACT Study survey.

### PROGRAM SPOTLIGHT: CODY'S STORY

*The Healthy Families Program has served families in Brown County for 20 years. In addition to working with mothers and their infants, the program employs Fatherhood Specialists who specifically reach out to and support fathers in the community through one-on-one home visiting, parenting classes, and regular group sessions that allow dads to meet and talk about parenting with other dads. Cody enrolled in the home visiting program when his daughter, Maggie, was 2 months old. At the time, Cody was struggling to parent Maggie while raising 3 other children, dealing with alcohol dependency, and grieving the death of Maggie's mother from an overdose. Cody met weekly with his home visitor who shared information about development, health, and nutrition and encouraged and supported Cody to play with and hold Maggie as much as possible. Cody and his home visitor also spent time discussing how Cody himself had been parented, identifying sources of support, and building a trusting relationship. That relationship allowed Cody to open up and ask for help when he needed it. With the support of his home visitor, Cody enrolled in an alcohol treatment center, has learned how to better navigate the child support system, and received housing assistance to move his family to a safe and stable neighborhood. Cody and Maggie will graduate from the Healthy Families Program in 2017.*

## Early Childhood Systems and Statewide Partnerships

The FFHV Program works closely with partners in the Department of Health Services, Department of Public Instruction, Child Abuse and Neglect Prevention Board, Office of Children's Mental Health, and Wisconsin Alliance for Infant Mental Health on efforts related to maternal and child health, early childhood education, child abuse and neglect prevention, infant/early childhood mental health, and parent engagement. In 2016, the FFHV Program contributed to a number of statewide initiatives aimed at improving care systems for families with very young children. This work included:

**Zero to Three Community of Practice:** The FFHV Program convened a cross-sector team of early childhood professionals to participate

in a national community of practice focused on better integrating home visiting in early childhood systems so that more infants, toddlers, and their families benefit from well-coordinated, high-quality systems.

**Wisconsin’s Blueprint for a Comprehensive and Aligned System for Early Childhood Screening and Assessment:**

This document provides a roadmap for cross-sector screening and assessment practices that ensure all young children and families receive recommended assessment, intervention, and needed follow-up support to promote healthy developmental outcomes. The FFHV Program participated in the development of the original blueprint and the updated edition released in 2016, and integrated many of the principles and best practices outlined in the blueprint into practice and professional development offerings.

**Office of Children’s Mental Health Collective Impact Initiative:** The FFHV program is represented on the trauma-informed care workgroup of the initiative, which seeks to ensure that Wisconsin’s systems, including home visiting, are family-friendly, trauma-informed, easy to navigate, equitable, and inclusive. Local programs have worked to infuse trauma-informed care principles into their services, and concepts of trauma and trauma-informed care are integrated into home visitor training.

**PROGRAM SPOTLIGHT: JENNIFER’S STORY**

*The Howe Community Resource Center provides home visiting services to families living in Brown County. It is part of a network of family- and child-serving agencies working to ensure all children in the community are safe, healthy, and ready for school. Jennifer is mom to twin toddlers. She has struggled with addiction issues in the past, and the home visiting program has successfully supported her through recovery and sobriety while also addressing issues of family well-being and healthy child development. With the support of her home visitor, Jennifer recently achieved her goal of having her driver’s license reinstated and securing a vehicle. Jennifer’s first trip with her new license was to attend a meeting of the home visiting program’s Parent Advisory Council, where families are able to contribute to the direction and improvement of program services. Participating in the Advisory Council also allows Jennifer to meet and form connections with other parents, an important step towards expanding her network of support.*

**PROGRAM SPOTLIGHT: REACHING THE COMMUNITY**

*The Milwaukee Health Department offers home visiting services to hundreds of pregnant and parenting women, fathers, and young children each year. In 2016, the Health Department partnered with Serve Marketing and the Lifecourse Initiative for Healthy Families to launch a citywide campaign promoting the benefits of home visiting for families. The “Home Visits Help Support Stronger Families” campaign includes a new website where parents can find important information on topics like breastfeeding, immunizations, safe sleep, and prenatal care, learn more about the services available through a home visiting program, and connect directly with the Health Department to determine which program would be the best fit for their family. By connecting more families with home visiting programs, the campaign is part of a broader effort to reduce infant mortality in Milwaukee. In addition to the website, the campaign includes a strong social media presence and outdoor and bus ads in targeted communities. Current and former home visiting participants, as well as Milwaukee Health Department home visiting staff, are featured in all outreach materials. In its first four months, the campaign’s website and social media posts attracted more than 1.8 million views. Visit <http://www.homevisit.mke.com> to learn more.*

## LOOKING AHEAD TO 2017

The coming year will be an exciting one as we look to expand the reach of the FFHV Program and continue to improve services to families. Following an RFP process in 2016, services will now be available to families in 24 counties and 5 tribes. A new statewide data system for home visiting programs has launched that will improve data collection and reporting in the coming year. Through an innovation grant awarded from the federal MIECHV program, Wisconsin will also begin work on developing new tools and resources to support positive parent-child relationships for families in home visiting. Professional development offerings for the home visiting workforce will continue to expand, and a number of Wisconsin's home visiting programs will join in federal and statewide efforts to promote breastfeeding and address perinatal depression in 2017. Each of these efforts advances the work of the FFHV Program to partner with Wisconsin's most vulnerable families to promote healthy outcomes for young children.

***For more information on Wisconsin's Family Foundations Home Visiting Program,  
please contact:  
[dcfhomevisiting@wisconsin.gov](mailto:dcfhomevisiting@wisconsin.gov)***



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