

Healthy Opportunities for Parents to Experience Success (HOPES) **Healthy Families Iowa (HFI)**

Healthy Opportunities for Parents to Experience Success - Healthy Families Iowa (HOPES-HFI) is an evidence-based home visiting program for families that begins during pregnancy or at the birth of a child and can continue until the child reaches preschool age. The program follows the national Healthy Families America model of home visiting. A standard tool is used to identify level of risk and screens for the family conditions and characteristics that impact child growth, development, and health. Examples include family coping skills, parenting skills, and family functioning. Following the screen, families identified as "high-risk" are offered HOPES-HFI services and voluntarily agree to participate.

Healthy Families Iowa (HFI) Program Goals:

1. Promote optimal child health and development.
2. Improve family coping skills and functioning.
3. Promote positive parenting and family interaction.
4. Prevent child abuse and neglect, as well as infant mortality and morbidity.

HOPES-HFI is available in nine Iowa counties: Black Hawk, Polk, Woodbury, Scott, Lee, Hamilton, Clinton, Buchanan, and Muscatine. All twelve programs providing HOPES-HFI with state grant funds have been awarded national accreditation by Healthy Families America.

Funding and support for HOPES-HFI was established in 1992 through legislation with funds distributed to ten counties identified as having the highest needs. State funds at that time were allocated to the Iowa Department of Public Health for contract management. In FY04 the Department of Human Services initiated a contract with the Iowa Department of Public Health for \$200,000 of federal Temporary Assistance for Needy Families (TANF) funds to expand the HOPES-HFI grant after a reduction in state grant allocation for HOPES-HFI. As an effort to promote collaborative efforts to integrate all Early Childhood programs, in FY06 legislation was changed requiring transfer of funds from IDPH to the Office of Empowerment. In FY12 funds were once again allocated to the Iowa Department of Public Health for contract management.

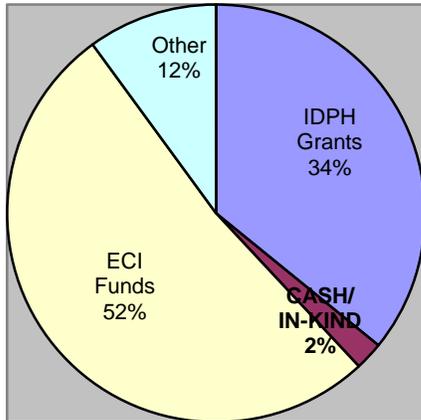
Program Specifics

- Voluntary home visiting program following HFA standards (critical elements).
- Provides support to overburdened (high risk) families with children during the prenatal to preschool years.
- Identifies families through a standardized screening process.
- Identifies barriers and develops an individual family support plan (family goals) based on the family's strengths and needs.

Performance Measures

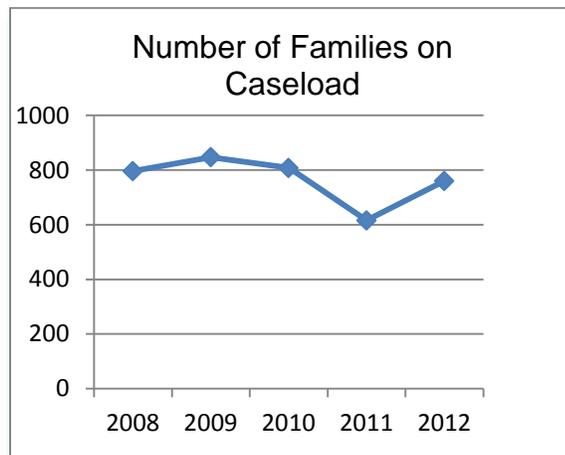
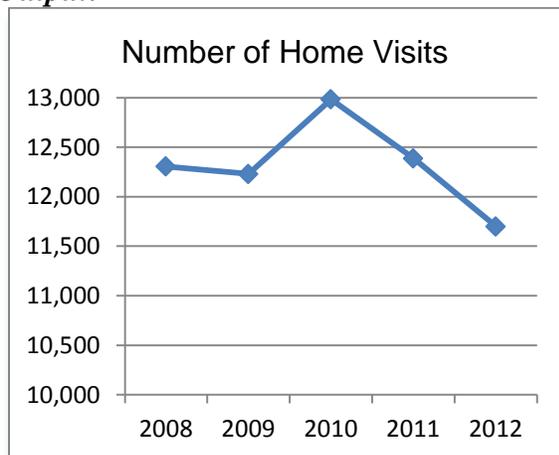
Input:

HOPES-HFI FUNDING SOURCE
FY2012



• IDPH Grants	\$684,379.00
• CASH/IN-KIND	\$41,574.00
• ECI Funds	\$1,060,928.00
• Other funding	\$234,568.00
TOTAL	\$2,021,449.00

Output:



Number of Home Visits: 11,699

Number of Families served: 760

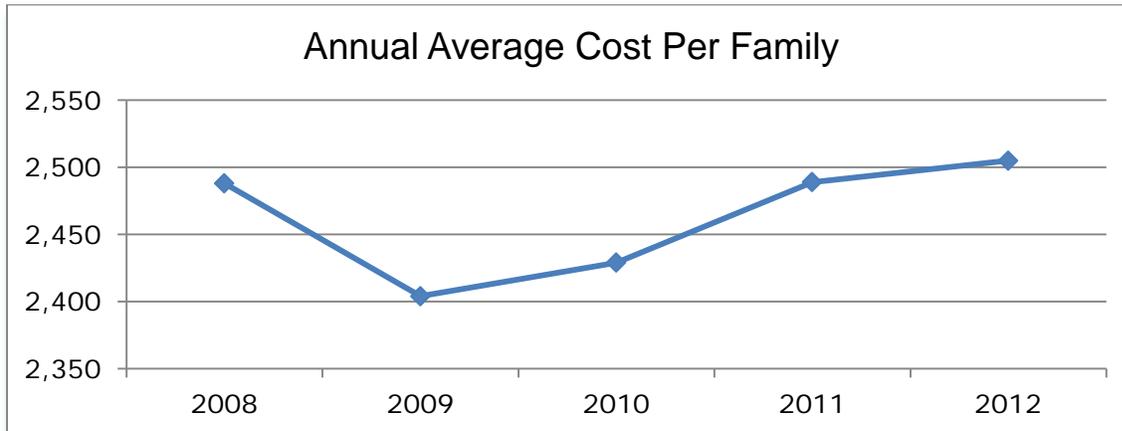
Number of Target Children served: 732

Quality:

- Number of families offered HOPES-HFI: 412
- Number of families enrolled in HOPES-HFI: 308
- Average number of months families participated: 21
(Retention rates are reviewed annually with the program's Advisory Group and informally with staff during weekly supervision, staff meetings, etc.)
- Healthy Families America accredited: All 12 funded programs
- Two HFA trainings were offered in state
 - Primary training: 2
 - Total number of participants in trainings: 40
10 participants trained in assessment

Efficiency:

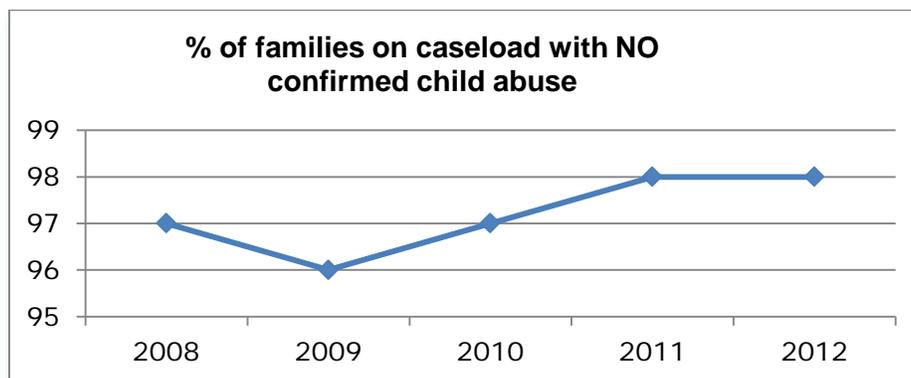
- Average annual cost per family: \$2,505



Increases in annual cost per family reflect increasing operation costs with status quo or decreased funding.

Outcomes as related to program goals:

1. Promote optimal child health and development
 - Target children with health insurance coverage: 98%
 - Target children \geq age 2 years immunized per schedule: 98%
 - Prenatal care received: 96% received five or more prenatal care exams
2. Improve family functioning
 - Families exited program with goals met/partially met: 49%
 - Screening completed for maternal depression: 1148
 - Screenings positive for maternal depression: 223
 - Referrals made based on a positive screen for maternal depression: 157
 - Social isolation: 82% of families identified reported issue as improved or resolved
3. Promote positive parenting and family interactions
 - Participated in parenting education class/group: 26%
 - Father of baby or male in "fatherhood" role involved: 64%
4. Prevent child abuse and neglect
 - Families with confirmed abuse/neglect continued participation in HOPES: 78%
 - Families with no confirmed child abuse/denial of care: 98%



Alignment with the vision and goals of the Early Childhood Iowa (ECI) Strategic Plan:

School ready

Developmental Screenings – 85% of children received screenings
Early ACCESS referrals – 88% of children screened and identified as
suspected/potential delay are referred to Early ACCESS.

Healthy children

Medical home – 98% of children with Medical Home
Preventative health exams – 83% received exams per schedule
Lead Screening – 82% screened for elevated blood lead level

Secure and Nurturing Early Care and Education

6% accessed Child Care Resource and Referral following referral
Preschool recommended for three year olds - 43% of children age \geq 3yr. attend
preschool

Safe and Supportive Communities

37% accessed housing support (rent assistance, heat assistance, HUD)
24% accessed further education (GED, Community College, ESL)
18% accessed employment services (Workforce development, unemployment)