



**House Committee on Early Childhood and Human Services
Healthy Families Oregon (HFO)
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Overview of HFO

- **Accredited-** evidence based child abuse and neglect home visiting model offering intensive and sustainable child development and parenting services to reduce child maltreatment and increase family resilience and child well-being
- **Central Administration-** brings alignment across all regional sites through implementation of shared policies and procedures responding to the Healthy Families America Best Practice Standards
- **15 grantees-** subcontracted services in some counties
- Services provided in **33 of 36 counties**
 - Currently RFA for Coos and Curry Counties
 - Service expansion into Lincoln County in Governor's budget
- Our **community partners** are:
 - Education service districts
 - Local & regional non-profit agencies
 - County health departments



Program Goals

Promotes positive parent-child relationships, supports healthy childhood growth and development and enhances family functioning.

Building trusting, nurturing relationships with parents

Partnering with parents to identify strengths and utilize problem-solving skills

Improving the family's support system through linkages and appropriate referrals to community services



Service Offerings

Screening & Resource Referral

- In 2022 over 2,000 families were provided screenings.

Intensive Home Visiting Services

- Families determined to be at higher risk for adverse childhood outcomes through the use of a standardized research-based screening tool are offered ongoing home visiting services.



Engagement of Families

- We connect with new families in hospitals, through community partner referrals, and when interested parents reach out directly.
- Families are asked about their needs and strengths using HFO's New Baby Questionnaire during a personal screening interview.
- Services are recommended for each family based on their unique situation, including community resources and supports.
- If home visiting services are offered and accepted, visits occur weekly for the first six months.
- Services continue for at least three and up to five years.



Guiding Principles

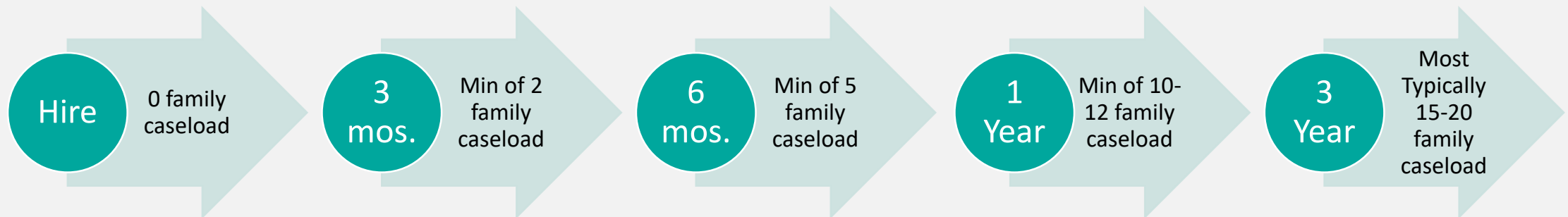
- We put **communities in the driver's seat** – to identify existing service gaps and the best way to get support to families.
- We **partner with families** and honor diverse family structures and parenting practices, elevate family voice and decision-making, and promote equity.
- Our **relationship-based approach** relies on an infant mental health philosophy that creates healing, trauma-responsive relationships with families.
- Our work is grounded in the **parallel process**: the relationships we build serve as a model for the supportive, positive relationships we help families cultivate with their children; supervisors likewise support home visitors so they can optimally support families.



Home Visitor Capacity

- **The cost of implementing HFO is primarily in staff and supervisor wages and family materials.**
- **Service levels for HFO are determined by the number of Home Visitors and their capacity to serve families.**
- **Caseload capacity progresses over length of employment. With full caseload capacity achieved after 12 months of employment.**

Length of Employment	Total	Capacity for number of families served
< 3 months	7	0
3 - 6 months	13	26
6 - 12 months	23	115
> 12 months	33	330
> 36 months	72	1080
TOTAL	148	1551





Healthy Families America Model

The HFA Model is rooted in 3 core concepts:

- *Relational Health and Attachment*
- *Trauma Informed Practice*
- *Reflective Capacity*





HFA Research Outcomes

- HFA is a highly rated evidence-based practice, especially for prevention of entry into the child welfare systems and promoting family well-being.
- HFA has over 35+ peer reviewed published articles and 14 randomized control trials that compare outcomes for families enrolled in HFA vs. those not offered HFA services. *Research is consistent on demonstrating positive results and impact for families.*
- Every \$1 dollar spent on HFA produces an estimated Return on Investment of \$1.43 in benefits for families and society. For some families, ROI is even higher. *A seven year study of HFA found an ROI of \$3.16 (\$5.11 in 2022 dollars) families involved with child welfare.*



Program Impact Areas

Strengthening Parent-Child Relationships

- *HFO parents are more confident as parents and more likely to parent in ways that promote healthy development. They interact more positively with their children and create safer and higher quality home environments*

Promoting Healthy Child Development

- *HFO parents are accessing health care, getting access to early development screenings and referrals, and have better birth outcomes at higher rates than Oregon children generally*

Enhances Family Well-Being

- *HFO parents have improved maternal health, greater self-sufficiency, and reduced instances of child welfare cases*



Impact Data

66% of parents reported reading to their children daily, greatly exceeding national averages

95% of parents reported that they engaged in positive, developmentally supportive interactions

59% of parents reported improved parenting skills from program enrollment to the 6-month follow-up

66% of HFO parents reported a decrease in parenting-related stress

99% of HFO children had a primary care provider, compared to 96% in Oregon.

90% of HFO children had a well-child exam in the last 12-months, compared to 67% in Oregon.

84% of all HFO children were up to date with immunizations and 85% of HFO children were fully immunized by age two (compared to 70% statewide).

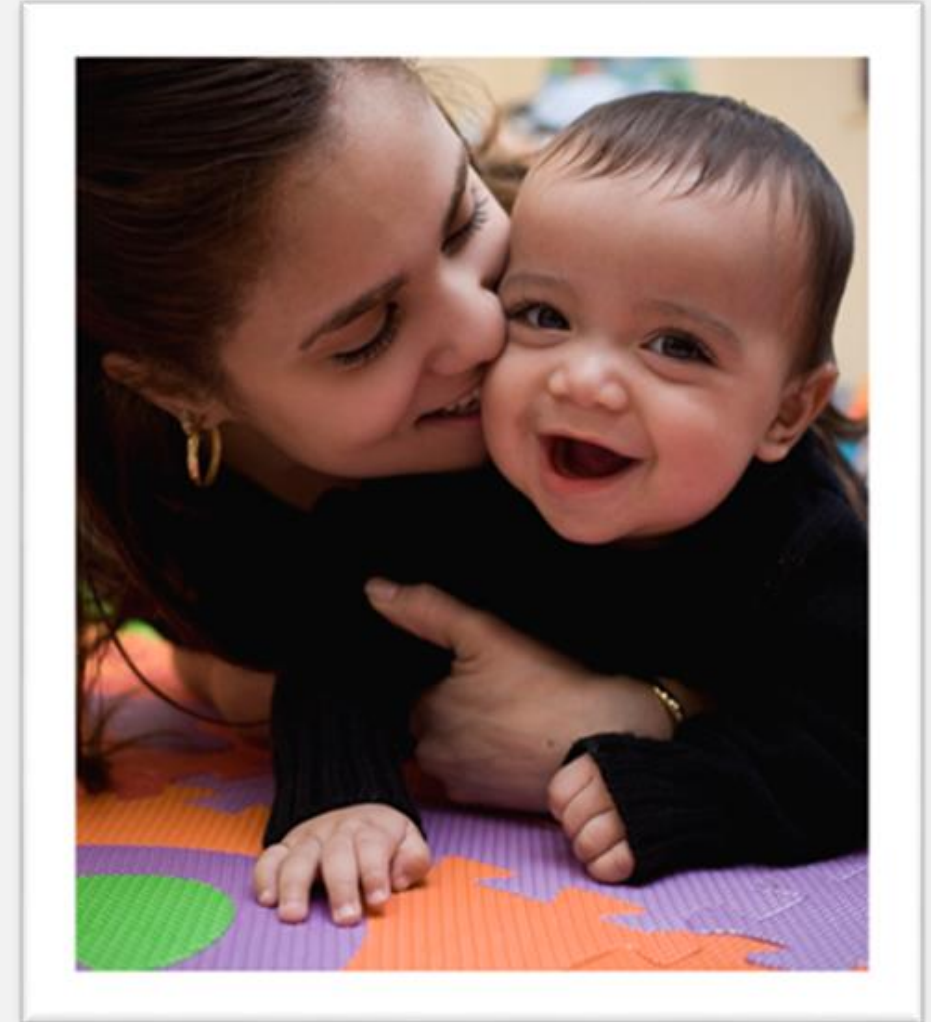
In 2020, 80% of all HFO children were reported as having one timely developmental screenings using the Ages and Stages Questionnaire (ASQ)



Home Visiting System Building & Coordination

Highlight on two Projects:

1. Home Visiting System Committee
2. Family Connects & Healthy Families
Coordination Project





Home Visiting System Work

Home Visiting System Committee

Sponsor: Early Learning Council

Facilitation: Partnership between OHA, DELC, and foundations

Structure: Multiple aligned groups contributing to work

- HVS Committee
- HVS Working Team
- HV Collaborative
- Provider and Parent Feedback

Activities Completed:

- All committees operational
- HVS Working Team presented recommendations to Committee

Next Steps:

- Committee chairs will be presenting to Early Learning Council
- Developing operational strategies from recommendations

Family Connects & Healthy Families Coordination Project

Sponsors: Oregon Health Authority and Department of Early Learning & Care

Facilitation: Pritzker Children's Initiative

Community Partners:

- Early adopters of Family Connects
- Healthy Families Oregon
- Early Learning Hubs

Activities Completed:

- Affinity Group meetings completed
- Feedback summarized into 'SWOT' analysis

Next Steps:

- Use community based participatory process with workgroups to develop strategies for a community driven work flow for FCO & HFO implementation
- Connect this project to the work of the Home Visiting System Committee



Questions & More Information

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