

Learning Conversation Notes	
Name of Partner: Child Abuse Prevention Council (CAPC) HomeFirst	Date: October 5, 2006
Number of Children Served: 166	Ages: 0 yr (31), 1 yr (23), 2 yr (32), 3 yr (38), 4 yr (22), 5 yr (20)
When Served: 7/1/2005 to 6/30/2006	Gender: 77-Male 89-Female Ethnicity: 70 - Caucasian 2 - African Amer. 77 - Hispanic 17- Multiracial
Number of Children Served: 122	Ages: 0 yr (31), 1 yr (14), 2 yr (23), 3 yr (28), 4 yr (17), 5 yr (9)
When Served: 7/1/2006 to 9/30/2006	Gender: 49-Male 73-Female Ethnicity: 34 - Caucasian 1 - African Amer. 73 - Hispanic 14 - Multiracial
Conversation Participants: Kathleen Shenk, Billie Jean Glover, Karla Marquez, Nicole Hayes, Leticia Marginez, DeAnne Thornton, Don Ferretti, Nancy Baggett, Janice Critchlow, Janey Crider	
Outcomes: <ol style="list-style-type: none"> 1. Families served will have the knowledge, skills and resources to raise their children in healthy environments conducive to reaching appropriate developmental milestones. 2. To sustain the skills parents learn in the program, parents served will share their childhood development knowledge and developmentally appropriate parenting practices with other families of 0-5 children independent of program participation. 	
Performance Measures: <ul style="list-style-type: none"> • Demographics (number of 0-5 served by gender, age, ethnicity and when services were provided) utilizing the First 5 Placer Demographic Tool. • Early Childhood Outcomes Screening Forms for each child served • Photos and Stories relating to the outcomes • Survey of parents who have participated in leadership training to capture how parents have sustained their skills beyond involvement in the program and have shared this knowledge with other parents • Family case record will contain the required TCM documentation, which includes: <ol style="list-style-type: none"> 1. Comprehensive Individualized Needs Assessments, 2. Service Plans, 3. Encounter Logs and 4. Case notes. 	

What is this data telling us about achievement of outcomes?

Number of parents continuing in the program from 05-06 have increased from the 04-05 year. Contributing factors are the stability of home visitors, of resources and accessibility.

More fathers, partners, and boyfriends are participating in home visits over this reporting period.

This year HomeFirst is improving in retention of Caucasian families.

Services in Foresthill have decreased due to changing demographics for the area.

Early Childhood Outcome Screening Forms

Home visitors complete periodic screens for each child served. Staff impression is this tool is easy to drift into subjective scoring, but it does evaluate a wide range of “what is happening in the family”.

The aggregate graph shows that most families improved to a “true” score with the exception of indicators 13 and 17.

Ind 4: Safe: Demonstrates appropriate self comforting behavior.

Relates to Outcomes 1 and 2: Story indicates parents are still too accepting of children’s agitated behavior and become agitated themselves. Home visitors assist parents to start with a calming voice and continue from there.

Many children came in at 5 so there is little shift in the graph.

Ind 7: Health: Free of exposure to illicit drugs, tobacco, alcohol, and other environmental hazards:

Relates to Outcome 1 Healthy environments – Smoking seems to be the greatest issue among families with children screened during this reporting period. Where drugs and alcohol affect the parents directly and the child indirectly, secondhand smoke affects the child directly. Home visitors are trying to educate the parents to the dangers of secondhand smoke. Parents are trying to improve their environments by using suggestions, tools and referrals provided by the home visitors.

Ind 13: Participating in a learning environment with appropriate enrichment activities:

Relates to Outcome 1: Initially families are unaware of what constitutes a learning environment. For example just getting on the floor with the child and playing. Exit graph indicates parents are more comfortable to engage in playing but some parents need constant encouragement. There was dramatic improvement when parents were provided with knowledge and they are using this knowledge with behavior issues with their older children as well.

Ind 17: Parent/Caregiver: Participating in a formal or informal network for the family. At program entry, these families had very little as far as support networks. HomeFirst helps the families make the connections to other parents, playgroups, and agencies. Self-imposed isolation was a major factor as well as transportation issues. The program encourages these families to engage with other families.

Ind 19: Parent/Caregiver: Engaged in positive parenting and child development practices. The concept of small and simple activities for developmental learning is difficult for most of these parents. If you can assist a parent to engage in positive parenting practices, that parent is more likely to engage in positive child development practices.

Ind 20: Parent/Caregiver: Satisfied with their knowledge of and ability to foster the child's development
The parents will usually tell staff at intake what their needs are. All but nine parents moved to a score of 3 or higher. Those that remained at a 2 had their own mental health, developmental or substance abuse issues.

Parents Leadership Surveys (05-06) see attached

14 parent leaders were identified. All indicated they learned from their home visitor and were treated professionally.

Survey results speak to the sustainability outcome and parents do share information gained with other parents of children age 0-5.

Photos and Stories

Pictures indicate appropriate play and interaction. Networking in both small and large groups is encouraged.

In what ways will we apply what we have learned from our data?

Home visitors will focus more on training parents to use comforting behavior for themselves and then for the children. Tone of voice is a major behavior skill.

Providing the parents with this knowledge has such dramatic results, teaching and coaching parents in this manner should be continued.

Continue practices that are working with positive results and watch closely when a family suffers a crisis or trauma.

Continue to capture photos and stories relating to the outcomes.

Other points that were made during the conversation:

Family Developmental Matrix is another tool that staff will be exploring to use in place of the outcome screens beginning July '07. The agency is also considering adopting the Parents as Teachers Model.

In spring 2007 leadership parents will be given opportunities to further develop their skills through a structured 12 month training module.

Most of the families who left the program were due to the client no longer maintaining contact or having left the area.

It seems like the parents who are taking advantage of the HomeFirst program are currently at higher risk than have been seen in the past data sets.

Next Steps:

Capture pregnant moms in the prenatal numbers on the demographic tool.

Continue to collect 06-07 data in preparation for learning conversation or report requirements in the spring, specific date and time to be determined.