

HFNY POLICY AND PROCEDURE MANUAL	
Subject	Outreach to and Engagement of Families
Policy	Healthy Families New York programs utilize persistent and creative outreach methods to engage and re-engage families as well as to maintain family involvement. Programs define, measure and analyze the retention rate of participants in the program in a consistent manner and on a regular basis at least once a year.
Site specific reference	3-1, 3-2A-B, 3-3A-B, 3-4A-C
Effective date	July 2001
Revised date(s)	June 2007, October 2010
Appendices	-Pre-Intake Activity Form (MIS) -Change Form (MIS) -Home Visit log (MIS) -Guidelines for Engaging Families and Building Trust -Creative Outreach Pre and Post enrollment activities and checklist

Rationale:

To ensure that HFNY services are offered on a voluntary basis. The voluntary nature of HFNY services demonstrates respect for the rights and decisions of potential and current program participants. While the decision to participate in program services at any point is voluntary, HFNY staff use persistent and respectful outreach methods in recognition of the fact that many families will want to establish trust and confidence in the program before agreeing to initiate services.

Similarly, a variety of circumstances may cause participating families to discontinue home visits for a time. This policy ensures that the program is structured to allow for these circumstances without immediate termination of services and to provide a framework for re-engaging families who have become disengaged. This policy ensures that programs have a process for reaching out to and engaging families, as well as for maintaining family involvement and re-engaging families who may be more challenging to serve.

Guidelines

1. Voluntary nature of services

HFNY Program sites must offer home visiting services voluntarily and programs have procedures in place to ensure services are offered to families solely on a voluntary basis. Materials such as brochures, service agreements and participant Bill of Rights may be used to inform families about the voluntary nature of services.

2. Outreach and Engagement techniques

Each HFNY program develops comprehensive guidelines that specify the techniques used for outreach and engagement. They may include telephone calls, family centered practices, home visit attempts, mailings, parenting groups, and contacts to referrals sources, along with other techniques approved by your agency. Follow-up is an essential component of outreach.

3. Outreach Strategies

a. Traditional Outreach

- is used to introduce the family to the program and the services and might include flyers, posters, mailings, etc.
- materials should be culturally, gender, and language appropriate for the various groups in the target area.

b. Creative Outreach

- is used to engage or re-engage families in the program by building the family's trust and continuing to offer support.
- is a more flexible approach that is tailored to individual families.
- is used to assist families in understanding how the program could be of value to them in particular.
- program staff utilize their knowledge of the family, including their strengths, living situation (i.e. location, access to phone, etc.) challenges, and gestational age or age of the child in their selection of outreach activities.
- examples of creative outreach strategies might include phone calls to inquire about mother's and baby's well-being and inquire if they have any questions or concerns, materials that are geared specifically to the father's role in child development, or calling to provide information and referral based on existing knowledge of the family, letters that mention the stage of gestational development or the baby's developmental milestones, invitations to program activities, references to the child's age and development in both phone calls and mailers, and references to the family's strengths and goals.
- in the HFNY MIS, Creative Outreach refers only to post-intake activities.

4. Pre-intake Outreach

- a. For parents who are offered an assessment, or who have been assessed and offered home visiting services but do not immediately accept, program sites develop and use positive, persistent outreach efforts to build family trust and attempt to engage them in an assessment or in the home visiting component of the program. Supervision is an excellent place to strategize ways to continue to build trust and engage families.
- b. These outreach activities may continue, but do not have to continue, until the target child is three months old if it seems that continued efforts may result in engagement. Supervisors work with staff to determine if engagement efforts should continue. This decision is made using information about the family that is

gathered from sources such as the referral agency or the Kempe. If a family has not been successfully engaged in home visiting services by the time the baby is three months old, efforts are discontinued and the family is taken off of the list.

5. Post-intake Outreach

- a. For enrolled families who seem to be disengaging from the program, (i.e. missing visits) positive and persistent outreach efforts are also to be used to re-engage them back into the program. Supervisors and staff spend time in supervision strategizing ways to continue to build trust, re-engage families and maintain involvement.
- b. Creative Outreach (Level X status) corresponds to the family's circumstances and not those of the worker or the program. For example, families may not be placed on Level X when a worker is on leave of absence or vacation, or when the program is having trouble filling a vacancy. It is the program's responsibility to visit the family according to the family's current home visit level.
- c. The Supervisor will help the FSW determine the frequency and type of outreach to pursue. In general, some form of contact with the family is attempted at least once a week with families in creative outreach. If the family is opposed to visits, phone contact may be attempted at least weekly and in-person visits attempted as appropriate with the family's permission.
- d. While the circumstances of families may vary, the program places families on outreach status (Level X on the MIS change Form) when they have missed 3 consecutive home visits and there has been no communication. This would not include a family who calls prior to the visit to reschedule. The date on the MIS change form corresponds to the date of the third missed home visit
- e. In order for a family to be placed back on their previous level, they need to have received two consecutive home visits. The date on the MIS change form is the same date as when the second consecutive home visit occurred.
- f. Families are returned to their same or a higher frequency of visits when they are taken off of Level X. This decision is made based on discussions between the supervisor, worker and family (not necessarily at the same time.)
- g. Programs try to re-engage families for a minimum of three months (92 days exactly) however, before 92 days, they are taken off of Level X status immediately if:
 - The family has refused services
 - The family has moved from the area.
 - The family has been re-engaged in services
- h. Families may be maintained on creative outreach for as long as deemed appropriate if their circumstances make it likely that they will be re-engaged. Supervisors discuss these situations with staff and document them. Programs utilize the credentialing tab 3-3C Creative Outreach to assist them with managing families on Creative Outreach. Programs strive to keep the overall percentage of families on creative outreach at or below 10%.
- i. When families leave the service area for extended periods of time, they may be placed on Level X. A full review of the case with the Program Manager and other relevant staff is held. This review includes the family's intentions to return and

ideas for remaining in contact (e.g. such as sending age appropriate child development curricula). This review ~~should be held and~~ documented. If a family does not return within 6 months, their case is closed. Programs need to have internal policies in place to guide them in their decision making.

6. Documentation of outreach and engagement

- a. Evidence that above guidelines are being implemented is documented in participant files, supervision notes and the MIS.
- b. Pre-intake outreach activities are documented on the MIS pre-intake activity form and, any internal forms such as progress notes, as specified in individual program policy.
- c. Post-intake outreach activities are documented on internal forms such as progress notes as specified in individual program policy. Programs utilize the MIS Change Form to place families on, and remove them from, creative outreach status (Level X).
- d. Acceptance of services, refusals of service, and family retention rates are reported by programs through the state Management Information System.

7. Definition and measurement of retention rates

Programs are required to define and measure the retention rate of participants in the program in a consistent manner and on a regular basis, at least once a year. Programs are required to address in writing in the Annual Service Review how they might increase retention rates based on its analysis of programmatic, demographic, social and other factors related to dropping out of the program after receiving services every year. Programs compare data for families who left the program to families who remained in the program. Program use data collection (Credential Tab: 08. 3-4. A and B Retention Rate Analysis) and informal methods, such as discussions with staff and others involved in program services. (See Annual Service Review.)