NEW YORK STATE | Office of Children and Family Services | Healthy Families NY

Healthy Families NY

Triennial Report

Andrew M. Cuomo, Governor

Sheila J. Poole, OCFS Commissioner

2019

NEW YORK STATE | Office of Children and Family Services

Prevent Child Abuse New York

Center for Human Services Research, University at Albany, State University of New York

Healthy Families America

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Healthy Families New York: A Home Visiting Program That Works!

Background

In accordance with section 429 (7) of the Social Services Law (SSL) (Chapter 141, Laws of New York, 2000), the New York State Office of Children and Family Services (OCFS) is required to submit a report to the Governor and Legislature every three years regarding all home visiting programs in New York State, collectively known as Healthy Families New York (HFNY) that are funded under section 429 of the SSL. This report is being submitted on behalf of OCFS and the HFNY Central Administration (CA) partners: Prevent Child Abuse New York (PCANY), the Center for Human Services Research (CHSR), and the 44 programs that promote safety and well-being for children and families in high risk areas of New York State (NYS).

HFNY is an evidence-based prevention program that seeks to improve the health and well-being of children by providing intensive home visiting services to expectant and new parents living in targeted high-risk communities. Participation in the program is voluntary. The goals of the program are to promote positive parent-child bonding and relationships; prevent child abuse and neglect; promote optimal child and family health, development and safety; and enhance family self-sufficiency.

HFNY started in 1995 and now operates 44 programs throughout NYS. From its inception through June of 2019, HFNY has provided nearly 1,750,000 home visits to more than 43,000 families. Approximately 6,000 families are served each year, at an average annual cost of $5,000 (upstate) to $6,100 (New York City) per family. The HFNY program is managed by OCFS, which contracts with community-based agencies (e.g., local departments of social services, hospitals, health care clinics, community service organizations, etc.) to provide home visitation services to families throughout the state. The HFNY program supports OCFS's commitment to promote services that are developmentally appropriate, family-centered, responsive to local needs, community-based, and demonstrated to be effective in achieving desired outcomes. The HFNY program has received a number of national distinctions, including a designation from the RAND Corporation's Promising Practices Network as a "Proven Program," indicating the program has demonstrated effectiveness using extremely rigorous scientific standards. As a Healthy Families America (HFA) accredited program, HFNY is also considered "evidence-based" for home visiting under the Maternal, Infant and Early Childhood Home Visiting programs and "well-supported" for in-home parent skill-based programs under the Title IV-E Prevention Services Act. The HFNY program looks forward to its continuation for many more years, given its track record of success.

Eligibility for the Program

Screening is used to target expectant parents and parents with an infant less than 3 month of age who are deemed to be at risk for child abuse or neglect and live in targeted communities that have high rates of teen pregnancy, infant mortality, welfare receipt, and late or no prenatal care. Parents who screen positive are referred to the HFNY program and a Family Resource Specialist (FRS) assesses parents for risk of child abuse and neglect using the Parent Survey. If parents score above a certain threshold on the checklist indicating the presence of substantial risk, they are eligible to receive intensive home visiting services. If parents score under the threshold, they are referred to other needed community services.

Statewide Program Participant Demographics

Below is a snapshot of participants enrolled from April 1, 2016, through March 31, 2019. As these figures show, HFNY provides services to a diverse group of families.

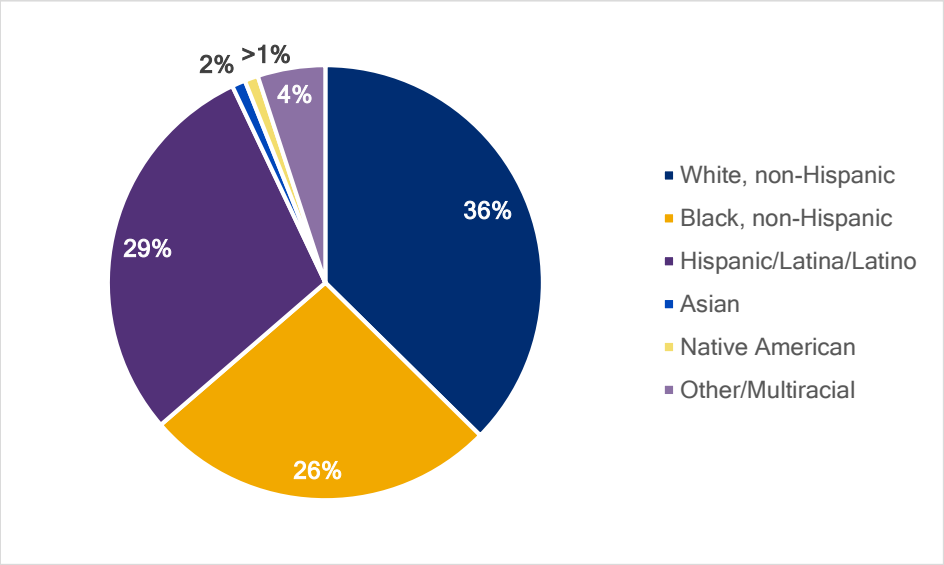


Figure 1. Healthy Families New York Participant Race/Ethnicity

Although the teenage pregnancy rate is declining, 18 percent of HFNY participants were 20 years of age or younger at the time of enrollment, while the majority of participants were between the ages of 21 and 30 at the time of enrollment.

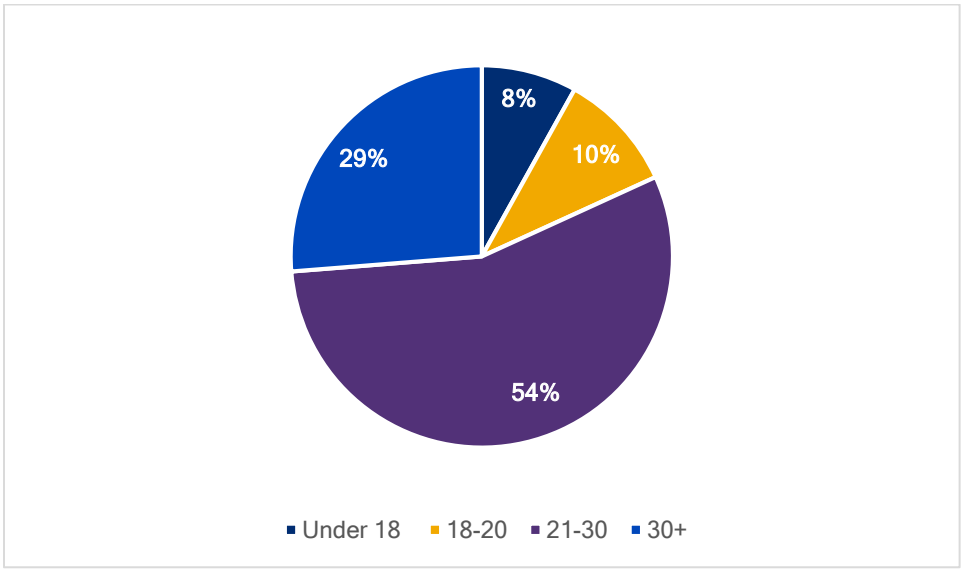


Figure 2. Healthy Families New York Age of Primary Caregiver at Enrollment

About a third of HFNY participants have less than a high school degree and need assistance to reenroll

in school or to enter a job training program.

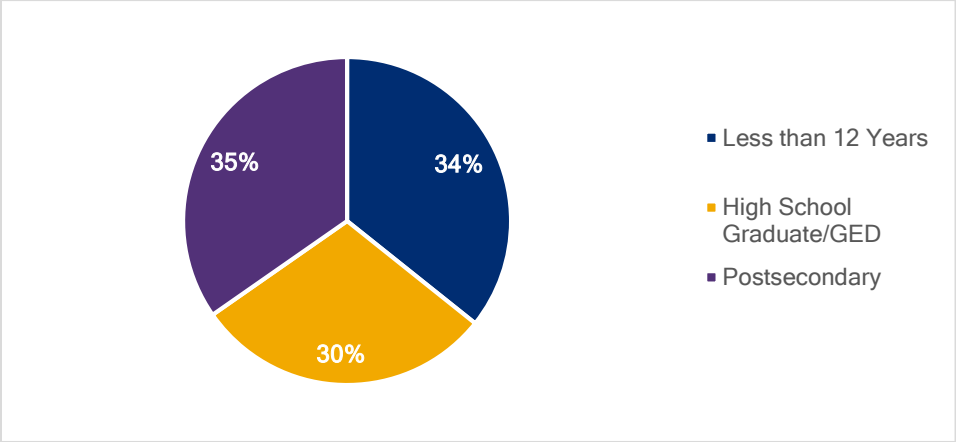


Figure 3. Healthy Families New York Education of Primary Caregiver at Enrollment

Many HFNY families come to the program with low or very low income. At the time of enrollment, 20 percent of families were receiving Temporary Assistance for Needy Families (TANF), and 52 percent were receiving Food Stamps. Home visitors work with families on budgeting, nutrition, and job readiness skills.

HFNY reaches many families at the optimum time, prior to poor parenting practices being developed. At enrollment, 59 percent of participants were first time mothers, and 64 percent of families enrolled before the baby was born. Home visitors assist families in obtaining prenatal care, support good self-care for mothers, assist families in preparing for a baby's arrival, and provide education and information on pregnancy, childbirth, and child development.

Staff Characteristics and Training

HFNY home visiting program staff are highly trained individuals who live in the targeted communities and share the same language and cultural backgrounds as program participants. Many HFNY program staff speak languages other than English, including Spanish, French, Creole, Hindi, Urdu, Mohawk, and American Sign Language. Home visitors are selected primarily based on personal attributes such as warmth, fondness for children, non-judgmental attitudes, and belief in non-physical methods of disciplining children. Home visitors are often able to reach families who might not go to an office-based setting to receive services. Most (78 percent) home visitors are parents themselves and 58 percent reside in the target area in which they provide services. Although home visitors are not required to have any post-secondary education, currently about 22 percent have taken courses at the post-secondary level and 51 percent of HFNY program staff are college graduates.

Staff are oriented and prepared by the HFNY training team for their roles through trainings for Family Resource Specialists (FRS), Family Support Specialists (FSS), Supervisors, and Program Managers. The skills and knowledge of staff are further developed through prenatal training, family goal plan training and other introductory and advanced training events.
The goal of the HFNY trainings is to teach the home visiting program staff the skills needed to perform home visits and assessments, including training on parent-child interaction, child development and

strength-based service delivery for home visitors; and training for supervisors and managers on their role in promoting quality services. Core training is facilitated by a team of approved HFA trainers from PCANY. The training team utilizes reflective training practices to support relationship-based work in the field.

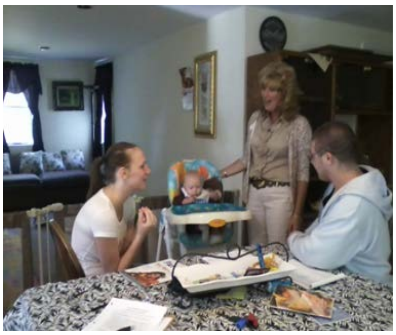
The FRS core training (Parent Survey for Community Outreach), a comprehensive four-day training, is designed for staff whose primary role is to conduct initial assessments in the home to identify strengths and challenges unique to the family. It is also ideal for home visitors who want to advance their communication skills to more confidently address difficult situations with families. Topics include, but are not limited to: identifying overburdened families, interviewing skills, conducting risk assessments, completing necessary paperwork and documentation, family-centered support services, and communication skills.

The FSS core training (Integrated Strategies for Home Visiting), also a comprehensive four-day training, guides home visitors to build on families' strengths, supports them in identifying and achieving goals, and assists families in maintaining a healthy environment for babies. Topics include, but are not limited to: establishing and maintaining trust with families, goal setting, completing necessary paperwork, the role of the home visitor, communication skills, and intervention strategies.

HFNY program supervisors and managers also attend trainings and receive resources and support in the following areas: administrative, clinical, and reflective supervision; quality assurance; crisis management; case management; and reflective practice. In addition, supervisors and managers attend all trainings required for the roles they supervise.

Services

Home visits are scheduled bi-weekly during pregnancy and increase to once a week after the mother gives birth, remaining at this level until the child is at least 6 months old. As families transition through the service levels, home visits occur on a diminishing schedule. The home visiting program can continue services until the target child is 5 years old or enrolls in kindergarten or Head Start. Home visitors typically carry a caseload of 15 cases when the home visitor is seeing families weekly, and up to 25 cases as families transition through service levels. The content of the visits is intended to be individualized and culturally appropriate. During the prenatal period, home visits focus on promoting healthy behaviors, discouraging risky behaviors, coping with stress, and encouraging compliance with prenatal care. During subsequent visits, activities focus on supporting parents, improving the parent-child relationship, helping parents understand child development and age-appropriate behaviors, encouraging optimal growth, providing assistance with access to health care, working with parents to address family challenges, and developing individual family support plans to improve self-sufficiency and family functioning. Home visitors utilize curricula approved by HFNY's central administration as well as standardized instruments to assess children for developmental delays. Referrals are made to local early intervention programs or other community providers as needed.



Administration of the Program

HFNY is a multisite system, administered by a central administration (CA) that provides guidance and leadership to the network of HFNY programs. The partners in the HFNY CA team include OCFS, Prevent Child Abuse New York (PCANY), and the Center for Human Services Research (CHSR).

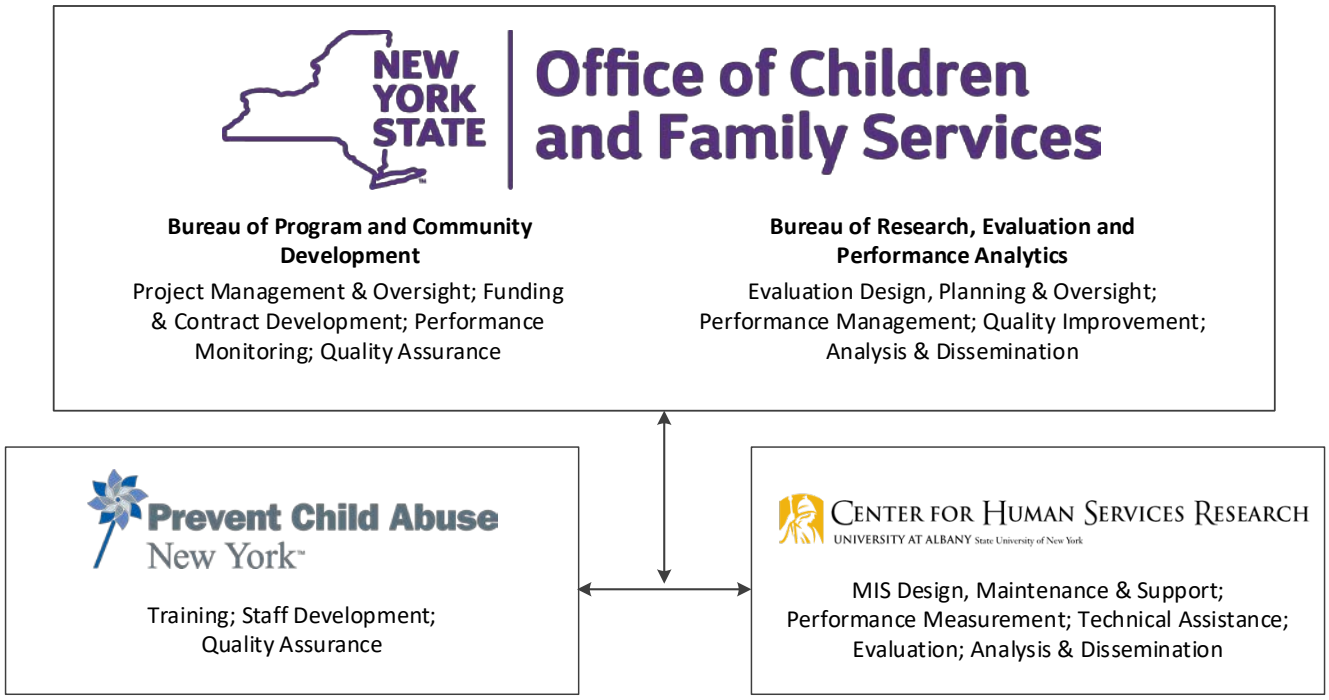


Figure 4. Healthy Families New York Central Administration Organizational Chart

The CA team supports the statewide system in six functional areas (1) policy, (2) training and staff development, (3) quality assurance, (4) technical assistance, (5) evaluation, and (6) administration, as well as providing the system with information and networking support, access to educational resources, and assistance with national model accreditation. The CA also follows a set of general practices consistent with responsible system administration. This includes advisory group support, hiring practices, fiscal management, and strategic planning.

Policy

The CA develops a set of system-wide policies to guide the functioning of the CA and specify the interactions between the CA and the sites. In addition, the CA develops policies and procedures that guide site operations and the implementation of the HFA Best Practice Standards. Policies are developed, revised, and updated with input from members from each CA partner and site program staff.

Training and Staff Development

The CA has a process in place to ensure sites have a system to meet identified needs for training to assist sites in implementing and maintaining practice in accordance with the HFA Best Practice Standards. CA has the capacity to ensure HFA-required training is available for all sites in the system. The training content developed by CA is based on the needs identified through the six functional areas of the multisite system and includes input from sites.

Quality Assurance

The CA has a quality assurance system that determines the degree to which the multisite system meets the HFA Best Practice Standards. The CA quality assurance plan includes annual site visits from OCFS; annual observations of program staff by trainers from PCANY, with additional documentation review and site support; and biannual review of program performance data, with ongoing data collection assistance from CHSR.

Technical Assistance

The CA provides technical assistance to all sites within its system to continuously improve the quality of services being delivered at the local level. On-going technical assistance and support is available, and is based on site-identified needs or information gathered about the site through the quality assurance system, training, or evaluation of program services.

Evaluation

The multisite system has a formal evaluation component that follows a set of general practices consistent with conducting a quality evaluation. This evaluation is conducted by qualified evaluators and is integrated into the planning process to inform service delivery. The goal of the evaluation is to evaluate the effectiveness of services and determine how each site, and the system, is meeting its goals, objectives, and expectations. The evaluation team informs practice at the CA level and provides site-specific data to each site within the system so it can be used to continuously improve practice. Annual reports evaluating the effectiveness of the services funded under section 429 of the SSL are attached as Appendix A. *2016-2017 Program Services and Outcomes Analysis*, Appendix B. *2017-2018 HFNY Annual Service Review*, and Appendix C. *2018-2019 HFNY Annual Service Review*. Following the completion of the *2016-2017 Program Services and Outcomes Analysis*, the name of this annual report was subsequently changed to the *HFNY Annual Service Review* to align with HFNY program requirements.

Accreditation

HFNY is a Healthy Families America (HFA) accredited multisite system that allows all of HFNY's 44 program sites and the CA team to achieve accreditation status. The HFA accreditation is valid for five years. HFA completed the accreditation process in 2019 with CA and programs. The next accreditation will begin in 2023.

HFNY has been recognized by the national governing body as a leader in the HFA movement. Several members of the CA team sit on national committees providing technical assistance to the national system on matters of training, evaluation, cultural competency, policy development, and system enhancement.

Fatherhood Initiative

HFNY continues to recognize the essential role of fathers in supporting the growth and development of children. The mission of the HFNY Father Involvement Initiative is to actively and consistently engage fathers in HFNY programs by supporting their role in promoting positive child development outcomes and long-term family success. The program strives to: (a) encourage fathers to participate in every level of service, from initial outreach attempts to long-term home visiting; (b) send strong and positive messages to communicate to families and communities that HFNY values and encourages fathers' involvement; and (c) continue to assess, evaluate, and enhance programs' effectiveness of efforts made to engage fathers.

To assist programs with tracking and supporting father engagement, HFNY developed a report in the Management Information System to reflect each individual program's work with fathers. Programs are now able to determine the number of fathers involved with their program, the number that have participated in home visits, and the number of referrals made for the fathers residing in the home. For example, from 1/1/19-3/31/19, 2,075 fathers were residing in the home where services were provided statewide; of those, 37 percent were present during the assessment and 71 percent participated in at least one home visit. Programs made referrals for 24 percent of the fathers residing in the home.

Support to Locally-Funded Programs

OCFS has received several inquiries from communities wishing to begin an HFNY program utilizing local funds. OCFS, along with its CA partners, continues to work with these communities and provide training, management information systems capability, technical assistance, networking opportunities, and use of policy and procedures. Over the past three years HFNY has provided support to Columbia and Oswego counties.

Maternal, Infant and Early Childhood Home Visiting Program

The federal Patient Protection and Affordable Care Act (ACA) of 2010 authorized the creation of the Maternal, Infant and Early Childhood Home Visiting Program (MIECHV) to promote and improve the health, development, and well-being of at-risk children and families through evidence-based home visiting programs. The New York State Department of Health (DOH) was designated as the lead entity to accept and administer New York State's MIECHV funds. These federal funds have been decreased from $9.2 million dollars annually to the current amount of $8,336,421. In New York State, MIECHV funding is used to support Healthy Families New York (HFNY) and Nurse-Family Partnership (NFP) only. OCFS, receives a portion of these funds to support MIECHV implementation through an MOU with DOH, providing administrative oversight of HFNY MIECHV-funded programs statewide, and serving as the co-lead of the MIECHV evaluation team with DOH.

Competitive Award: Client Retention Evaluation

The DOH was awarded an additional $9.4 million in federal MIECHV competitive grant program funds in March 2015, to support six additional evidence-based home visiting sites through 2017. The expansion made possible by the award of MIECHV competitive grant program funds to address unmet needs in New York State. As part of this expanded initiative, DOH, in partnership with OCFS, is evaluating program-level strategies to increase client retention and engagement. To maximize the effectiveness and learning potential, all 17 MIECHV-funded sites are participating in the evaluation (see Table 1). The findings of this evaluation will support the implementation of services with fidelity to model requirements, promote client receipt of, and retention in, services, and increase the achievement of program outcomes. In 2018, the Health Resources and Services Administration revised the MIECHV funding structure to combine the funds previously allocated via competitive award and formula-based award into a single award.

Table 1: MIECHV-Funded Local Implementing Agencies

County	Local Implementing Agency	Model	Agency Type	Community Setting
Bronx	Catholic Guardian Society and Home Bureau	HFNY	Community-based organization (CBO)	Urban
Bronx	Bronx Lebanon Hospital	HFNY	Hospital	Urban
Bronx	Morris Heights Health Center	HFNY	Federally qualified health center (FQHC)	Urban
Bronx	NYC Department of Health and Mental Hygiene	NFP	Local health department	Urban
Erie	Buffalo Prenatal – Perinatal Network	HFNY	CBO	Urban
Kings	SCO Family of Services	NFP	Family service agency	Urban
Kings	CAMBA Inc.	HFNY	CBO	Urban
Monroe (3 grants)	Monroe County Department of Public Health (has expansion grant, too) The Society for the Prevention of Child Abuse	NFP HFNY	Local health department CBO	Urban Urban/Rural
Nassau	Visiting Nurse Service of New York	NFP	Family Service	Urban
Onondaga	Onondaga County Health Department	NFP	Local health department	Urban

Bronx	Montefiore Home Care	NFP	Hospital	Urban
Chemung	Comprehensive Interdisciplinary Developmental Services Inc.	NFP	Family Service	Rural
Dutchess	The Institutes for Family Health	HFNY	FQHC	Urban
Kings	Brookdale University Hospital	HFNY	Hospital	Urban
Kings	Sunset Park Health Council/dba Lutheran Family Health Centers	HFNY	FQHC	Urban
Schenectady	Schenectady County Public Health Services	HFNY	Local health department	Urban
Queens	Public Health Solutions	HFNY	CBO	Urban

Funding Sources

The majority of funding for the HFNY program comes from state appropriations, which for the last two out of three years has totaled $23,288,200. In state fiscal year 2019-2020, the amount was increased to $26,162,200 due to a Governor's initiative to give cost of living pay increases to reimburse programs and mitigate the impact of the Minimum Wage Act (Article 19 of the New York State Labor Law). These state funds support 44 HFNY programs throughout the state, as well as the contract with PCANY for training and staff development, and the contract with CHSR for the maintenance of the HFNY management information system and the evaluation of program services. Each HFNY program is required to provide a minimum 10 percent local share toward the program in the form of cash, in-kind services, or private donations.

OCFS received $4,216,995 annually in MIECHV funds from DOH in federal fiscal years (FFY) 2018 and 2019. In FFY 2020, these federal funds were cut to $4,105,995. A total of $3,837,725 is for contractual services provided by the local implementing agencies and $268,270 remains with OCFS to support the program administration. The initial funding directed at OCFS was used to enhance and expand four existing HFNY programs in the Bronx and Erie counties. MIECHV funds have since been awarded to serve Monroe County and Corona, Queens. Figure 5 presents the percentage of each funding type

Additional Funding for New or Expanding HFNY Programs

As a result of savings in Title IV-E adoption assistance delinking, approximately $1 million were designated to support HFNY home visiting programs. In June 2016, a request for proposals (RFP) was released by OCFS to begin new or expand existing HFNY home visiting programs in high-need and underserved communities using these funds. Twenty-nine applications for funding were received in response to the RFP. Of these, five proposals were selected for awards to expand four current programs and begin two new programs. Awards were made to expand into Franklin County, Orleans County, Niagara County, and Suffolk County. New programs were developed in Yates and Jefferson counties with a start date of December 1, 2016. An approved list was also established from the RFP for future

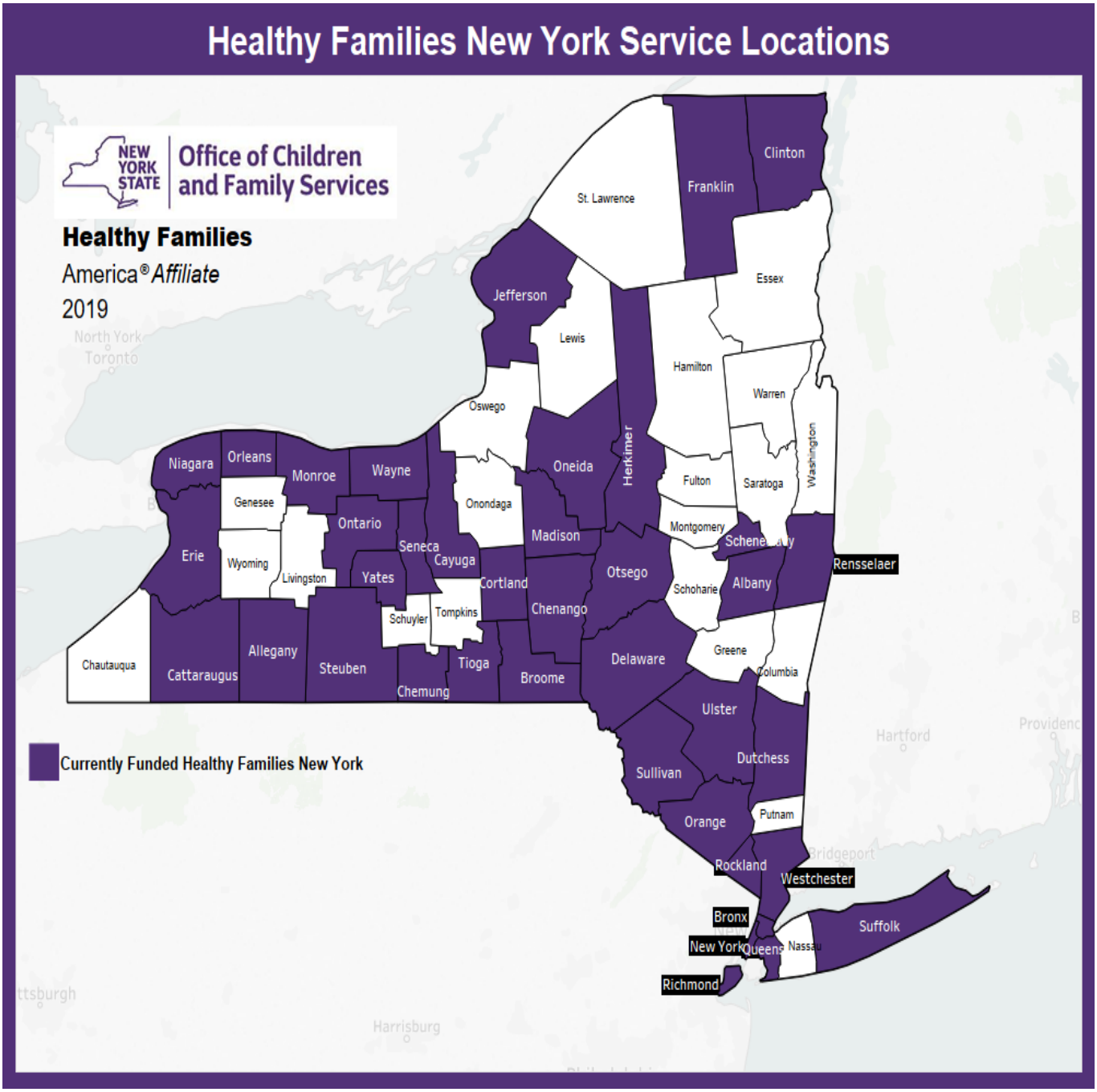
funding considerations if additional funds became available. In 2017, an additional $920,000 in adoption savings funds was made available, and HFNY was able to expand into the Red Hook community in Brooklyn, and into Wayne and Cortland counties. In 2018, another $191,076 in adoption savings funds, in addition to with state and MIECHV funds, were used to provide additional services in Rockland County and Corona, Queens.

In 2017, OCFS began to utilize $1,270,000 of Temporary Assistance for Needy Families (TANF) funds to support home visiting services. As a result, HFNY expanded services in currently funded programs to serve additional families in Broome, Chenango, Otsego, Herkimer, Delaware, and Steuben counties. These funds were also utilized in 2018-2019 as a supplement to other funding streams to support the HFNY program in Rockland County. Table 2 presents the new or expanded programs and their award amounts.

Table 2. New or Expanded HFNY Programs

Program	County	Region	Award Amount
Expanding Programs			
Sunset Park NYU Lutheran Family Health Services	Brooklyn	NYC	$200,000
Broome County Health Department	Broome	Syracuse Region	$225,000
Our Lady of Lourdes Memorial Hospital	Chenango County	Syracuse Region	$225,000
Opportunities for Otsego, Inc.	Otsego County	Syracuse Region	$112,500
Herkimer County Public Health	Herkimer County	Syracuse Region	$90,000
Delaware Opportunities	Delaware County	Albany Region	$58,500
Institute for Human Serviced	Steuben County	Rochester Region	$90,000
New Programs			
Wayne County Community Action Program	Wayne County	Rochester Region	$360,000
Cortland County Community Action Program	Cortland County	Syracuse Region	$360,000
Public Health Solutions	Corona/Queens	NYC	$325,000
Children's Health and Research Foundation	Rockland County	Westchester Region	$495,000

Healthy Families New York Service Locations



Healthy Families New York City Service Locations

Review of Current State and Federally Funded Home Visiting Programs[1]

Albany County

Albany County Department for Children, Youth and Families $1,176,898

Albany County Healthy Families provides services to approximately 286 families a year. This program is a unique partnership between Albany County's Department for Children Youth and Families and Parson's Child and Family Center, a local private not-for-profit agency. The target population covers the urban areas of Albany County, serving primarily low-income families and recent immigrants many of whom do not speak English and require the use of interpreter services. Albany County Healthy Families is part of the Albany County Single Point of Entry System (SPOE), which provides a centralized referral system for women's health, child development, and supports available through the county and community. This collaboration between the Albany County Department for Children Youth and Families and the Albany County Health Department was created to improve maternal and child health outcomes in Albany County.

Allegany and Cattaraugus Counties

Parent Education Program $781,442

This program serves approximately 155 families combined in Allegany and Cattaraugus counties annually. Both Allegany and Cattaraugus counties are very large and predominantly rural, and most families live in outlying areas. Enrollment includes 10 percent teen mothers and 82 percent unmarried mothers, with 49 percent of families having the biological father in the household and 20 percent with another supportive caregiver in the household. As a result of the lack of transportation, education and training, there is a high unemployment/underemployment rate, resulting in 63 percent of families receiving food stamps. Families face particular challenges with mental health and substance abuse issues. Five out of the 12 home visitors are males; the majority of all staff have been with the program for over five years. There is a certified lactation counselor on staff. The program is collaborating with the Seneca Nation of Indians to serve their families who live off the reservation.

Bronx County

Bronx Lebanon Hospital Center ($713,154 State, $217,985 MIECHV) $931,139

South Bronx Healthy Families provides services to an average of 154 families a year in the South Bronx community target areas. The community served, known by the residents as Morrisania, has over 30 percent foreign-born residents from a variety of regions, including Mexico, Central and South America, the Caribbean and a variety of countries in Africa. The population speaks languages such as Spanish, French, Garifuna, Mandingo, Fulani and Wolof, among others. A large percentage of the population lives below the poverty level. The program was able to secure another source of funding to expand their work with fathers and teen parents.

[1] Fiscal Year 2019-2020 awards are presented for each program.

Catholic Guardian Services ($554,035 State, $164,961 MIECHV) $718,995

Healthy Families Parkchester provides services to an average of 110 families a year in their Bronx community target area, described as Crotona Park and West Farm in the Bronx. The community is an area of high service needs, as indicated by high rates of child abuse, teen pregnancy, infant mortality and poverty, including a large population of teen and single mothers.

Morris Heights Health Center ($687,428 State, $206,203 MIECHV) $893,631

Healthy Families Morris Heights provides services to an average of 148 families a year in the Bronx community target area. Healthy Families Morris Heights' service area is greatly affected by poverty. The target area is a densely populated, urban area geographically located in the northwest section of the Bronx, well known as the Kingsbridge Heights, Mt. Eden, Morris Heights, and Bedford neighborhoods. The population is racially diverse, young, and mostly single heads of household. Morris Heights was awarded a MIECHV competitive grant to further expand services into the 10467-zip code community of Williamsbridge in 2015.

Broome County

Broome County Health Department $855,622

Healthy Families Broome (HFB) provides services to approximately 158 families a year in Broome County. HFB supports families with children from pregnancy until the child enters school, emphasizing that parents are their child's first and most important teachers. HFB Home Visiting Program provides an innovative fatherhood program to families offering tandem home visits by a fatherhood advocate and family support worker. The relationship between the home visitors and the family serves as the foundation for developing the family's parenting skills and confidence. During home visits, families learn child development information and participate in parent child activities that promote school readiness, and early literacy. By encouraging bonding, attachment, and teaching age appropriate expectations, HFB strives to prevent child abuse and neglect.

Cayuga and Seneca Counties

Cayuga/Seneca Community Action Agency, Inc. $514,257

This program serves approximately 130 families annually. Cayuga and Seneca counties are rural areas in Central New York with challenges of isolation and lack of transportation. The program serves the following areas in Cayuga County: Auburn, Port Byron, Cato, Martville, Scipio Center, Cayuga, and Weedsport, and the following areas in Seneca County: Seneca Falls, Waterloo, and Ovid. These areas have been identified as "high-risk" for low birth weight babies, out-of-wedlock mothers, Medicaid/self-pay for health care, late or no prenatal care, infant mortality, teen births, and teen pregnancy rates. Following their initial assessment and after they have made a connection with their home visitor, either the program manager or another supervisor will do an introductory visit to welcome the family and express their appreciation for allowing them into their home, to assess how they feel about the program and assure them that they want the family to get the most from the program.

Chemung County

Comprehensive Interdisciplinary Development Services, Inc. $694,043

Healthy Families Chemung provides services to approximately 120 families a year. The program serves Chemung County, a rural area located in south central New York. The target population is primarily first- and second-time parents. According to data, 50 percent of the counties' newborn population is Medicaid eligible. There is a 14 percent poverty rate and 8 percent unemployment rate. Healthy Families Chemung receives funds through Eaton Corp and the Child Care Council each year to provide new books to enrolled families to promote early literacy. Given the loss of other services available to families in Chemung County, Healthy Families Chemung provides necessary services to those in need.

Clinton and Franklin Counties

Behavioral Health Services North ($389,094 State, $234,935 delinking) $624,029

This program provides home visiting services to an average of 146 expectant and newly parenting individuals and families a year in Clinton and Franklin counties and the Saint Regis Mohawk Tribe. The majority of parents receiving services are single mothers. Healthy Families' target area is the most northeastern county in New York, located on interstate 87 to the Canadian border and on the western shore of Lake Champlain. Clinton and Franklin counties are primarily rural counties, covering an area of 2,815 square miles, with Plattsburgh as the only city in a three-county area (Clinton, Franklin and Essex).

Cortland County

Cortland County Action Program, Inc.(CAPCO) $422,844

This program will provide services to 80 families in Cortland County. Cortland County is a rural county at the geographic center of New York State. An estimated 13.5% of Cortland County people live below the federal poverty level. People in poverty in this county struggle with employment, transportation, education and child care issues. Families in Cortland County have high risk factors for perinatal health and child safety. The infant death rate in this county is above the state rate and is highest in the 14 county Central New York Region. CAPCO has worked extensively with disadvantaged and marginalized children, youth, seniors, and families with a broad range of resources. Healthy Families Cortland County will strengthen struggling and at-risk families.

Delaware County

Delaware Opportunities, Inc. $308,790

Healthy Families Delaware County provides services to an average of 60 families a year. Delaware County is a geographically large, sparsely populated rural county, encompassing 1,460 square miles, located in the Southern Tier of New York State. There is no city in the county and no population center exceeding 5,000 people. Families served by Healthy Families Delaware County are subject to high rates of poverty, infant mortality, and teen pregnancy. There are no birthing centers and few doctors practicing obstetrics and gynecology in Delaware County. Therefore, networking and creative outreach

by all staff members is pivotal to the success of the program.

Dutchess County

Institute for Family Health ($799,001 State, 295,059 MIECHV) $1,094,060

Dutchess County Healthy Families provides services to an average of 130 families a year in Dutchess County. The program serves new and expectant parents in the town and city of Poughkeepsie, as well as in Hyde Park and Beacon. Since 2015, the Institute for Family Health was awarded MIECHV funds to allow the program to expand into Wappingers Falls, Fishkill, and East Fishkill/Hopewell. The program focuses on prenatal enrollment in order to capitalize on the impact that the program can have when beginning with families prenatally. The program is geared toward families with specific life factors that put them at a distinct risk for abuse and maltreatment of children, including stress for parents, such as single parenting, divorce, a history of substance abuse, mental health issues or domestic violence, unemployment or lack of medical or prenatal care.

Erie County

Buffalo Prenatal-Perinatal Network ($1,575,408 State, $547,355 MIECHV) $2,122,763

The Buffalo Home Visiting Program provides services to an average of 420 families a year in the Erie County target areas. The target population is primarily African American and Latino families, and those families displaying racial and ethnic disparities associated with birth outcomes in the target area. These families have low income, are without health insurance, and, on average, attend fewer prenatal visits and experience poor pregnancy outcomes. Many of these residents also exhibit other characteristics of living an impoverished life, including unstable residence with addresses that change regularly; intermittent availability of telephone services that make it difficult to schedule health appointments and receive reminder calls for keeping appointments; and lack of adequate transportation and child care that impedes accessing needed services. Erie County has one of the highest percentages of single mother households. Buffalo has been cited as the third poorest city in the United States, with 26.6 percent of its residents living in poverty.[2]

Herkimer County

Herkimer County Public Health $417,984

Herkimer County Healthy Families provides services to approximately 100 families annually in their service area. The residents of Herkimer County are faced with many stressors that make them more prone to child abuse and/or neglect including: isolation, poverty, single parenthood, mental health issues, drug use, and a lack of resources. The Herkimer County Healthy Families Program assists these overburdened families by providing them with a solid support system, parenting education, and child development information.

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[2] The Buffalo News, by Jay Rey, Published October 1,2016 taken from A Picture of Poverty from 2015 Census Data published September 30,2016 by Mark Mulville of *The Buffalo News*.

Jefferson County

North Country Prenatal Perinatal Council, Inc. $422,884

Healthy Families Jefferson County provides services to approximately 80 families a year. The program serves Jefferson County, a rural region located in the northern tier of the state where Lake Ontario and the St. Lawrence River converge. The target population is primarily first- and second-time parents who are experiencing additional challenges or stressors, such as mental illness, domestic violence, or substance use. According to the Statewide Perinatal Data System, in 2018, approximately 35 percent of the county's newborn population was Medicaid eligible. In 2018, the average poverty rate was 14.8 percent; however, for families with female heads of household and children present, the poverty rate increased to 43.7 percent. The 2018 annual average unemployment rate was 5.6 percent. The relationships between the home visitors and the families serve as the foundation for developing the family's parenting skills and confidence. During home visits families learn about child development and participate in parent-child activities that promote school readiness and early literacy. By encouraging bonding and attachment, and teaching age-appropriate expectations, Healthy Families strives to prevent child abuse and maltreatment.

Kings County (Brooklyn)

Brookdale Hospital Medical Center ($496,384, $497,580 State, $382,162 MIECHV) $1,376,126

The program serves approximately 308 families annually, primarily minority women (African American and Hispanic) of child-bearing age and their families who are of low socioeconomic status and exhibit high-risk factors for poor birth outcomes. The program serves populations that often delay entry into the health care system for a variety of reasons: lack of health insurance, lack of transportation, non-English-speaking, teen pregnancy, immigrant status or lack of child care, resulting in inadequate nutrition and late or no prenatal care. In February 2015, Brookdale Hospital Medical Center was awarded MIECHV funds to expand the program into additional zip codes in the target area. In 2019, Brookdale Hospital Medical Center was awarded additional funds to serve families in the Bedford Stuyvesant and North Crown Heights in Community District 3 area of Brooklyn. This population is culturally diverse with immigrants making up to 30 percent of the population.

CAMBA ($744,384 State, $200,000 MIECHV) $944,384

CAMBA's Healthy Families Program provides services to an average of 173 families a year in their Brooklyn target area of Flatbush. The program serves a large Haitian immigrant population. Most have few, if any, support systems in place. Due to cultural barriers and isolation, these families often fail to avail themselves of vital support programs and services. As a result, they face major challenges and barriers to receiving health and supportive services. CAMBA was awarded a MIECHV grant to serve 50 additional families in 2013.

Public Health Solutions $816,996

Bushwick Healthy Families provides services to approximately 140 families annually in their service area. The program serves Community District 4 – Bushwick, which is a largely Latino community. A third of the adult population is foreign-born, and nearly 14 percent of children aged 0-13 years live in

linguistically isolated households. The residents of Bushwick face many economic difficulties. The median household income is significantly lower than the New York City-wide average. A larger percentage of adults in Bushwick face unemployment (14.7 percent) than adults in New York City (11.2 percent). The vulnerability of Bushwick residents to violence, substance abuse and environmental toxins, as well as their lack of proper access to medical care, has detrimental effects on the health outcomes in this community, particularly with regards to maternal, infant, and children's health. All staff are bi-cultural/bilingual and familiar with working with immigrant populations. They are trained as certified lactation counselors and are able to provide strong home-based breastfeeding support and education to families about lactation. The staff are also trained in the use of the *Baby Basics* curriculum, which is geared to families with low literacy. The staff use the colorful *Curriculum Book*, which is framed as a gift to the families. A number of family events are held every year that support family networking and reduction of isolation.

The multicultural event at the end of the year in December brings together approximately 200 to 300 family members and other community members. Community baby showers help outreach to new families. A partnership with the Wyckoff Heights Medical Center provides Bushwick Healthy Families access to the Labor and Delivery birthing center to offer families a tour of the facility at the end of each baby shower. Several staff are also trained as childbirth educators and support families in developing birth plans and support preparation for labor and delivery.

Sunset Park Health Council, Inc. ($599,000 MIECHV, $234,935 Delinking) $833,935

Healthy Families Sunset Park is serving 132 high-risk families in the 11220 and 11232 zip codes. The lead agency is well established in the community as a provider of medical and community-based programs. Sunset Park's families struggle with growing food insecurity, high rates of teen pregnancy, and unstable housing, among many other challenges. The community struggles with limited English proficiency and low educational attainment among both children and adults. Sunset Park's target communities have 79 percent of residents that speak a primary language other than English at home. Most residents are of either Hispanic or of Chinese descent. The program also receives additional funds to serve 40 families in the Red Hook Houses, one of the largest public housing complexes in Brooklyn.

Madison County

Community Action Program for Madison County, Inc. $776,332

Healthy Families Madison serves approximately 160 families annually. The program serves Madison County, a very rural county with limited services and transportation. The service population is vulnerable and highly stressed pregnant or newly parenting families. Healthy Families Madison is one of the few services providers in the area and offers a wide range of services to families in need. The program has a strong fatherhood component, offers families the necessary support to prevent child abuse and neglect, and provides referrals to needed services.

New York County (Manhattan)

Dominican Women's Development Center, Inc. $613,990

Healthy Families Washington Heights provides services to 100 families. Program staff represent six

different cultures and countries. The multicultural strength-based approach allows the program to reach the diverse community in the Inwood and Washington Heights communities, which is comprised predominantly of immigrants from Mexico, the Dominican Republic, Puerto Rico, and Israel. According to the 2011 Community Snapshot, the community of Washington Heights/Inwood had a 34.7 percent rate of child abuse and neglect. Healthy Families Washington Heights provides the community with an evidence and strength-based program that addresses needs that will impact generations to come.

Northern Manhattan Perinatal Partnership, Inc. $661,399

Healthy Families Central Harlem serves the Central Harlem community of Manhattan. It provides services to approximately 100 families in Central Harlem. The program serves a diverse population. The ethnic and racial makeup of the community is largely African American, Hispanic, and African-born. The families in this community are disproportionately affected by disparities related to social determinants of health (e.g., food insecurity, housing insecurity, access to quality healthcare, education and literacy, trauma, and toxic stress). The barriers impacting this community include the inability to speak or read English, lack of knowledge about available health services and how to navigate the health care system, lack of health education and health literacy, and cultural assumptions or norms that are inconsistent with the health care system. The public health providers in the community do not have enough systems in place to address these needs. Healthy Families is a desired service to combat these issues and promotes healthy parent-child interaction and helps reduce the likelihood of child abuse and neglect.

University Settlement $554,053

University Settlement Healthy Families Program (USHF) serves approximately 80 families in East Harlem and sections of the Lower East Side of Manhattan. The program's target community has a rich history of immigration. University Settlement is well-connected to this community through its other programs and has the language capacity, cultural competence, and HFNY experience and expertise to expand the program to the Chinese immigrant community, while continuing to serve the English and Spanish speakers the program has been serving since USHF's inception. The program serves immigrants who are predominately low income. Most families are living on the economic margins and are challenged with poverty, unemployment, language barriers, housing issues, and the struggle to provide for their children. The two most common issues that families face are finding affordable housing and challenges associated with the families' immigration to the United States.

Niagara and Orleans Counties

Niagara County Department of Social Services $537,755
Pinnacle Community Services $211,442

Healthy Families Niagara serves approximately 100 families annually that reside in Niagara Falls and Lockport. The residents in the rural areas struggle with issues of poverty, unemployment, and lack of transportation. Residents experience numerous psychosocial stressors, and there is a lack of accessible services to address these issues. Niagara Falls has the fourth highest poverty rate for female-headed households with children among the 26 upstate New York cities. The City of Niagara Falls residents have lower incomes, less education, and a higher rate of chronic medical conditions than the rest of the state; 28.4 percent of the city's children live in poverty. Healthy Families Niagara has successfully

embedded a fatherhood component into the core program for the last several years. The fatherhood component of the program utilizes the fatherhood advocate either as part of the home visiting team with a family support worker or as the only home visitor. Curriculum specific to parenting and life issues is shared and includes information on topics such as discipline, communication styles, anger management, character development, making toys, cooking, tantrum prevention, father/child activities, and nutrition. This component also offers a support group to educate men about their role in parenting, and to help them navigate the ups and downs of parenting. Being under the umbrella of the multi service agency of Pinnacle Community Services, the program has the unique advantage of being able to offer services to families that help address domestic violence and mental health. The program is in the process of developing a mechanism to form a single point of entry for maternal and child health through the Healthy Moms/Healthy Babies coalition. In December of 2016, Pinnacle Community Services was awarded additional funds to serve an additional 40 families in Niagara and Orleans counties.

Oneida County

Integrated Community Alternatives Network $653,833

Healthy Families Oneida County services approximately 122 families annually within county lines. Oneida County is diverse and includes urban and rural communities. Despite this geographic diversity, the struggles that families face seem to be similar – substance abuse, mental health issues, poverty, domestic violence, teen pregnancy, and involvement with child protective services. Although Oneida County is rich in services, transportation is also a challenge when it comes to families accessing services for these issues. Healthy Families offers the families an opportunity to receive support and education related to child development and strengthening the parent-child bond by going into the family's home; therefore, eliminating the transportation challenge.

Ontario County

Ontario County Department of Social Services $223,278

Healthy Families Ontario, delivered through sub-contracted agency Child & Family Resources, Inc. provides services to approximately 63 families annually. The program serves a portion of Ontario County. The target population is expectant and new parents, including many ethnic backgrounds, histories and traditions, who live in a diverse region that includes some very rural areas in the county. The county includes two colleges, two hospitals, the five Finger Lakes, large agricultural regions, and a growing Mennonite population. The community faces several challenges due to the lack of transportation, limited services, low income, and the lack of affordable housing. The Healthy Families program has served this county since 2005, and continues to provide quality services while maintaining high capacity, retention, and positive service outcomes. Along with connecting families to resources, promoting self-sufficiency, providing parenting support, and reducing the risk of child abuse, Healthy Families Ontario has also integrated Baby Café, a community support for parents. Baby Café is facilitated by the program staff as well as community partners who are also trained as certified lactation counselors. A second Baby Café group has been added within this county in 2019.

Orange County

Access: Supports for Living, Inc. $1,052,800

Healthy Families Orange serves 205 families annually in the communities of Newburgh, New Windsor, Middletown, and Wallkill. Newburgh has a long history of difficult economic circumstances: high rates of unemployment and poverty; large numbers of individuals receiving Temporary Assistance to Needy Families and Home Relief; and high rates of both juvenile and adult crime and violence. Participants are impacted by gangs, drug activity, and physical assaults. The influx of undocumented immigrants with language barriers, lack of appropriate services to meet their needs, and their immigration status presents additional challenges to the program. Maternal-Infant data shows significant rates of no or late prenatal care, low birth weight babies, out-of-wedlock births, infant/neonatal death rates, teen pregnancies, and Medicaid self-pay. Language barriers and lack of appropriate services to meet their specific needs have also impacted this population.

Otsego County

Opportunities for Otsego, Inc. $410,208

Building Healthy Families Otsego serves approximately 70-80 families annually. The target population is a mostly rural community that includes a large number of unskilled workers who work seasonal tourism jobs. Over the past few years, the region has encountered increased mental health challenges as well as increased tobacco and opiate use during pregnancy. The poverty rate exceeds that of the state. Building Healthy Families provides parenting support and referrals and promotes parent-child bonding, healthy development, and resiliency in this community. Building Healthy Families collaborates with medical practitioners, services providers and early childhood professionals to offer the Annual Building Healthy Families Community Baby Shower that provides resources, family fun and education about pregnancy, childbirth, breastfeeding, child development, and fatherhood.

Queens County

Sheltering Arms $504,476

This past year the program served approximately 118 families of a diverse ethnic background residing in the Jamaica area of Queens. Approximately 73 percent originate from 15 foreign countries, predominantly the Caribbean, South America, Mexico, and Spain. The people in this area speak Spanish, English, and Haitian Creole. The majority of enrolled families are households led by single mothers, while 40 percent have a biological father in the household. This area has the highest poverty rates in Queens, and similarly high rates for crime, drug abuse, child abuse, unemployment, and teen pregnancy. The program has a memorandum of understanding with the Queens Public Library to conduct prenatal workshops in the community. Two staff are Certified Lactation Counselors and the rest of staff are trained in this practice. The agency offers stress management groups for participants. The program is creating a “Prematurity Education Packet” with information provided by the March of Dimes to give to pregnant women they assess or enroll to educate them on strategies to reduce their risk of pre-term birth.

Public Health Solutions ($318,000 MIECHV $ 47,076 Delinking) $365,076

Healthy Families Corona serves 64 families in the target area of Community Districts 3 and 4 as well as zip code 11377-Woodside in Queens, New York City. Queens is the most ethnically diverse urban

area in the world and within Queens, CD 3 and 4 are the most ethnically and linguistically diverse communities. Over 100 language and dialects are spoken in Queens and include Central and South American countries as well as many East Asian countries. While birth outcomes in this area of Queens are generally better than NYC as a whole, they are worsening over time. This is most true for adolescents. Thus, the priority population will include pregnant and parenting adolescents who are not eligible for other home visiting programs.

Rensselaer County

Samaritan Hospital of Troy $881,734

Healthy Families of Rensselaer County has the capacity to serve 210 families annually. The county is diverse and includes urban, suburban, and rural areas; residents are from various socio-economic backgrounds. According to the most recent New York State Department of Health data, revised in October 2014, 11.6 percent of Rensselaer County residents were living in poverty. Many Rensselaer county residents suffer from mental health and intellectual disabilities issues which results in over one-third of enrolled families involved with mental health services or cognitive-intellectual disabilities services. In recognizing the importance of breast feeding to the health of the infant and bonding with moms, a supervisor was trained as a Certified Lactation Consultant and is available to go to the hospital to speak with new parents and has conducted home visits to help educate expecting parents on breast feeding.

Richmond County (Staten Island)

Vincent J. Fontana Center for Child Protection $651,727

Healthy Families Staten Island provides services to approximately 112 families annually. The service population for Healthy Families Staten Island is primarily made up of Medicaid-eligible pregnant women, including teens and their partners, single fathers and grandparents caring for a young child. There are a high percentage of child abuse and neglect investigations within Staten Island.

Rockland County

Children’s Health and Research Foundation ($384,023 State, $ 177,376 Delinking) $561,399

Healthy Families Rockland County will serve 102 families who are pregnant or have an infant less than 3-months old. The targeted area in Rockland County is a very diverse and densely populated. According to the 2010 Census data, 37 percent of households speak a language other than English at home. The service population will be made up of families that are primarily Medicaid eligible, teen mothers, and families that face disparities as a result of their socio-economic status, language barriers, and lack of education.

Schenectady County

Schenectady County Public Health ($629,865 State, $400,000 MIECHV) $1,029,865

Healthy Schenectady Families targets Schenectady County, one of the smallest counties in NY;

however, one with significant poverty and violence. The program serves an average of 220 families each year. A major indicator of poor birth outcomes is poverty and there is a significant disparity in the number of children living poverty in the city of Schenectady compared to other parts of the county. In February 2015, Schenectady County Public Health was awarded MIECHV funding to increase services within the city of Schenectady. Healthy Schenectady Families focuses much of its outreach efforts on enrolling city residents for HFNY services.

Steuben County

Institute for Human Services $968,316

Healthy Families Steuben serves approximately 250 families annually. Steuben County is a geographically large, rural community covering 1,409 square miles with an estimated population of 98,990. Challenges for some of these families include poverty, isolation, and lack of transportation to outlying areas, which is especially difficult for expectant or families with young children. Home visiting services offers these families access to parenting support so they can learn about their baby's developmental stages, activities to enhance their child's development, and where to find access to adequate medical care for themselves and their children. The program is working in collaboration with Southern Tier Kids on Track to ensure every new or expectant family in the county receives some form of early childhood education home visiting services and early developmental screenings. The program emphasizes early literacy and provides new books to families at least once a quarter. They also have staff that are trained as car seat technicians and lactation counselors, as well as a certified trainer who teaches parents infant massage, to support their families.

Suffolk County

Family Service League of Suffolk ($509,445, $199,695 de-linking) $709,140

The service population is approximately 114 families who reside in the Brentwood, Bay Shore, and Central Islip communities. Families in the target area struggle to overcome many social and economic disadvantages that limit their ability to provide appropriate care to their children, including low wages or dependence upon public assistance, limited educational attainment, inability to speak English or limited English proficiency, illiteracy or limited reading ability, single or teen parenthood, social isolation, crowded and substandard housing, high rates of substance abuse and violence in their neighborhoods, and childhood and marital histories of violence and neglect. The program manager and supervisor of this HFNY program are certified lactation counselors who have shared this education with all staff to be able to share this information with families to encourage breastfeeding. In December of 2016, the agency was awarded additional funds to serve additional families in the Amityville, Copiague, and Wyandanch communities.

Sullivan County

Sullivan County Public Health Services $274,067

Healthy Families of Sullivan serves approximately 100 families annually. Sullivan is a rural county, consisting of 1,011 square miles of woods and farmland, with two urban pockets in Liberty and Monticello. Risk factors are above the state average for unemployment, indicated reports of child

abuse/maltreatment, premature births, infant mortality, and the number of babies with low birth weights, teen pregnancy and mothers with no prenatal care. In 2013, countyhealthrankings.org deemed Sullivan County the second-worst ranking county in New York for health risks, including premature deaths, smoking, adult obesity, and lack of insurance. The program has staff that are trained as car seat technicians, crib safety trainers, and a Spanish-speaking certified breastfeeding peer counselor.

Tioga County

Our Lady of Lourdes Memorial Hospital, Inc. $702,394

Lourdes Tioga PACT Healthy Families Home Visiting Program provides services to approximately 125 families annually. Tioga County is a rural community with limited services for families. Many families do not have reliable transportation to access needed services. The program promotes the importance of fathers in the lives of children, which produce healthier outcomes for families. There is no other intensive home visiting program available in the county. The program conducts in–person outreach in the community to decrease barriers for families in accessing the program. Home visiting services will be expanded to Chenango County in the coming year.

Ulster County

Institute for Family Health $1,129,805

Ulster County Healthy Families provides services to an average of 224 families a year in their target area. Located in the Mid-Hudson Valley, Ulster County is a large, sparsely populated rural area with Kingston as its one urban center. Healthy Families' service population has a high percentage of minority participants, recent immigrants, non-English speaking parents, single parents, and teen parents.

Wayne County

Wayne County Community Action, Inc. $422,884

Healthy Families Wayne County will provide services to 80 families across the entire county with a periodization for underserved communities in the eastern side of the county. The Wayne County Perinatal Data Profile cites nine risk categories including Premature Birth, Low Birth Weight, Out of wedlock Births, Medicaid/Self Pay Births, Late or No Prenatal Care, Infant Deaths, Neonatal Deaths, Teen Birth Rate and Teen Pregnancy Rate. HFWC will serve areas that exhibit a higher than average number in a minimum of 5 out of the 9 risk factors.

Westchester County

Julia Dyckman Andrus Memorial, Inc. $528,334

Westchester Healthy Families serves approximately 80 families annually. The families are predominately from Spanish-speaking countries, prenatal and parenting families of children younger than three months of age who reside in Yonkers. Families face a variety of issues ranging from poverty to health-related issues such as low birth weight babies, childhood obesity, asthma, poor oral health, and trauma.

Yates County

Child & Family Resources $105,721

Healthy Families Yates, delivered through a non-profit agency, Child & Family Resources, Inc., provides services to approximately 25 families annually. The program serves the entire county. The target population is expectant and new parents that live within this diverse and rural county. This county is host to a large agricultural base, wine tourist industry, three of the Finger Lakes, and a thriving Mennonite population. The community faces several challenges due to the lack of transportation, limited services, low income/high poverty rates, and the lack of employment and housing opportunities. The Healthy Families program serves those who may have challenges accessing resources, need parenting skills support, as well as help working toward self-sufficiency. One initiative that Healthy Families Yates has integrated into their approach is the introduction of Baby Café, a community support for breastfeeding mothers. Baby Café is facilitated by the family support specialist and community partners also trained as certified lactation counselors. This small program is one of the newer HFNY programs (established in 12/2016), which has achieved and maintains full capacity, and reports consistent positive outcomes.

Appendix A. 2016-2017 Program Services and Outcomes Analysis

Appendix B. 2017-2018 Healthy Families NY Annual Service Review

Appendix C. 2018-2019 Healthy Families NY Annual Service Review