



# Birth & Beyond

Annual Evaluation Report  
FY 2018-19



All photographs in this report are stock photos that are posed by models.

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# Executive Summary FY 2018-19

Beginning in 1999, the Birth & Beyond Program (Birth & Beyond) has worked to provide quality community-based programs and services to prevent child abuse and neglect throughout Sacramento County. Managed by the Child Abuse and Prevention Council (CAPC), Birth & Beyond receives funding from a variety of sources: First 5 Sacramento, the Sacramento County Department of Child, Family, and Adult Services (DCFAS), and the Corporation for National and Community Service (CNCS). Located throughout Sacramento in areas of high need, Family Resource Centers (FRCs) provide standard services that are complemented by unique activities and special events that reflect the characteristics of their specific neighborhood. All Birth & Beyond activities, classes, community events, family activities, and direct services are operated out of the FRCs.

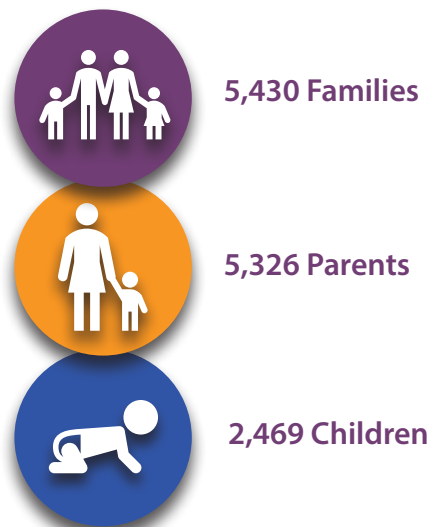
## Birth & Beyond Core Services

Birth & Beyond offers a continuum of child, family and community services, ranging from outreach and promotion, early intervention to more intensive intervention services.



## Birth & Beyond Clients Directly Served

Across its full menu of programs and services, Birth & Beyond directly served over 5,400 families across Sacramento County, including 5,326 parents and 2,469 children.



Source: FY 2018-19. Persimmony Report by Client Demographic.

## Service Integration within Birth & Beyond

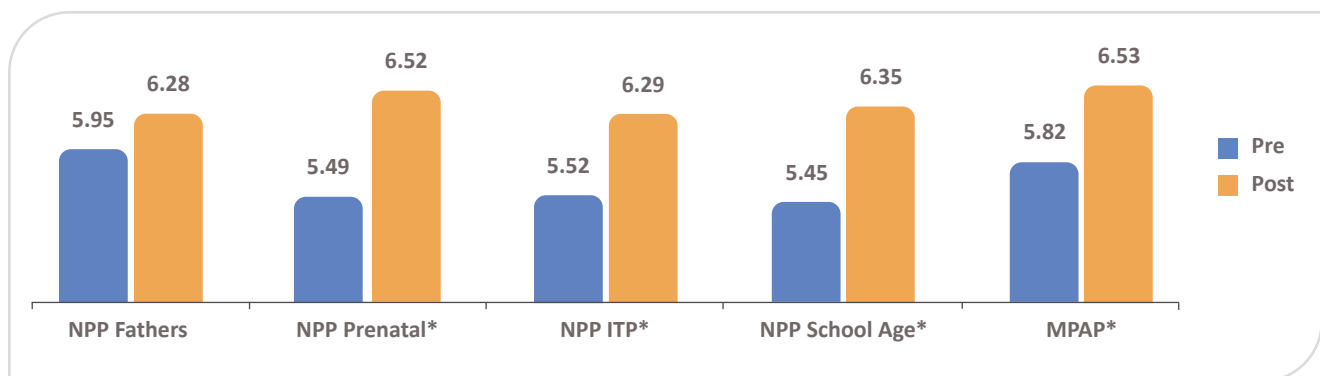
In order to have the largest impact on clients, Birth & Beyond encourages clients to participate in multiple FRC services. The table below displays the percentage of participants who engaged in more than one FRC service. For instance, 21% of Enhanced Core participants also participated in Parenting Education, 15% in Home Visitation, and 10% participated in Crisis Intervention.

<b>Among EC Participants</b>	X	21%	15%	10%
<b>Among PE Participants</b>	28%	X	9%	47%
<b>Among HV Participants</b>	22%	5%	X	53%
<b>Among CI Participants</b>	18%	14%	27%	X

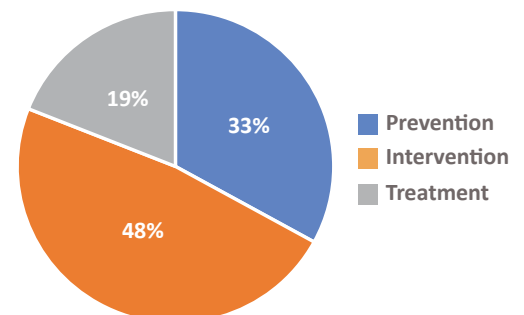
## Program Outcomes

**Parenting Education** was delivered through group-based classes at Family Resource Centers. Curricula included Nurturing Parenting Program (NPP) and Making Parenting a Pleasure (MPAP). In FY 2018-19, there were 679 families who attended 29 parenting workshops. Parental beliefs about child-rearing were tested using the Adult-Adolescent Parenting Inventory (AAPI), a tool that measures risk for child maltreatment. Overall, there were increases in parenting knowledge and skills across all parenting education programs. NPP Prenatal, NPP Infants, Toddlers, and Preschoolers (NPP ITP), and NPP School Age, and MPAP displayed statistically significant increases between pre- and post-test.

**Figure 1 — Changes in AAPI Scores Before and After Parenting Education, Split by Class**

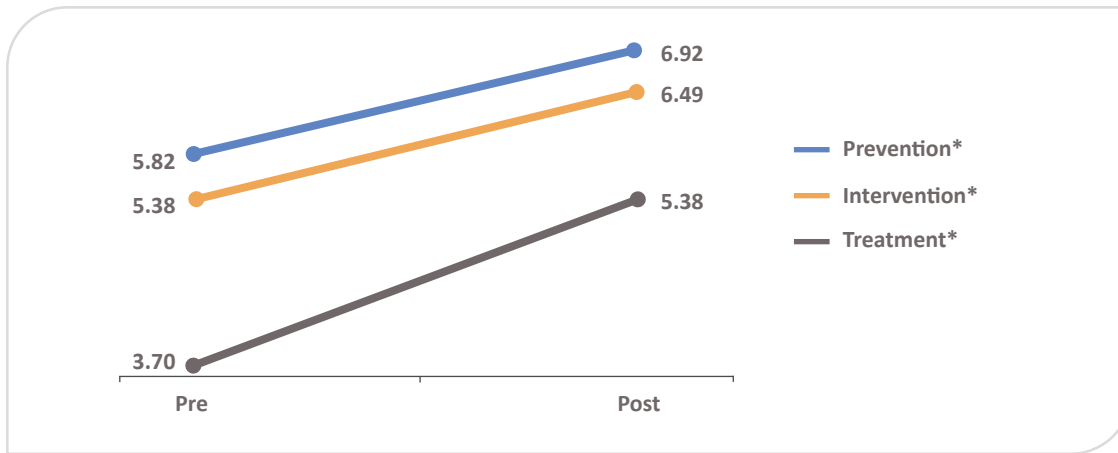


Birth & Beyond's **Home Visitation program** used the Nurturing Parenting Program (NPP), an evidence-based home visitation curriculum provided at least weekly, with a minimum of two months of visitation services. In FY 2018-19, 1,515 parents engaged in home visitation services. Parents were categorized into three groups based upon risk for child abuse indicated by their AAPI scores: prevention (low risk), intervention (moderate risk), and treatment (high risk). One third of participants were classified into the Prevention category, while almost half of participants (48%) were classified as Intervention clients, and almost one fifth of clients (19%) were classified as Treatment clients.



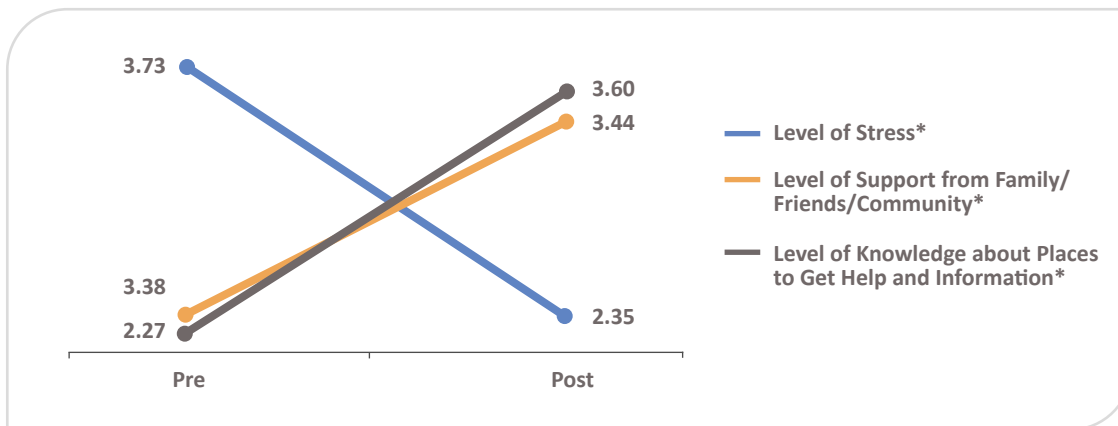
All three groups demonstrated statistically significant increases in AAPI scores after participation in home visitation.

**Figure 2 — Increases in AAPI Scores Amongst Different Service Groups in the Home Visitation Program**



**Crisis Intervention Services** are brief, targeted services for Birth & Beyond clients who are experiencing pressing concerns or issues. In 2018-19, Crisis Intervention Services served 2,657 parents and provided 84% (2,026) of them with at least one referral or linkage. Pre- and post-tests of Crisis Intervention Services clients indicated that parents who engaged in these services had a **decrease in stress, an increase in knowledge about where to get help and information, as well as an increase in parents’ perceived support from family, friends and their communities (all at statistically significant levels).**

**Figure 3 — Ratings of Stress, Support, and Knowledge, Before and After Participation in Crisis Intervention Services**



Source: FY 2018-19 Quarterly Performance Measures report in Persimmony. Crisis Intervention Services Pre/Post test. \*Indicates statistically significant change at  $p < .05$ . Changes in Stress and Support: source – Family Development Matrix. Outcomes on a scale of 1 to 5: 1=none, 3=some, 5= a lot.

Since 2001, Birth & Beyond has been tracking **child welfare outcomes** of families who received home visitation services to understand how which level of dosage results in the best outcomes for families and children. For this report, the 6 month and 12 month outcomes were tracked for children whose families had intakes between March 1, 2018 and February 28, 2019. Data were obtained from Child Protective Services (CPS) in September 2019, which allowed for even the latest intakes in February 2019 to have six month outcome data. **In this executive summary, all data reported include clients with 8 or more hours of Birth & Beyond Home Visitation (those with less than 8 hours or unknown dosage levels are included in the main body of the report).**

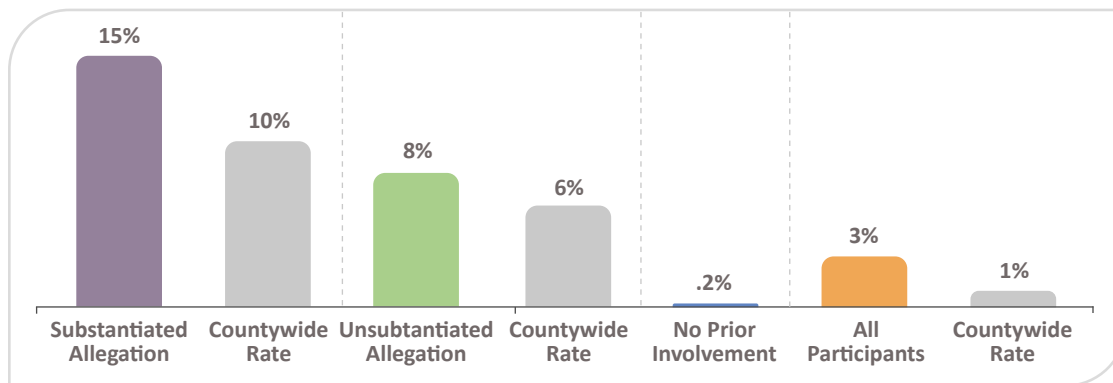


**Primary prevention:** Amongst children *who did not have any prior CPS involvement* and received eight or more hours of Birth & Beyond service (n = 379), very few had contact with the CPS system after their parents participated in Birth & Beyond’s home visitation program. Overall, less than 1% of children were the subject of a substantiated allegation in the 12 months after their parents began the program, with relatively few differences depending upon dosage level for this group. These results showcase that Birth & Beyond is successful in its goal of preventing child abuse.

**< 1%**  
**New Substantiated Allegation of Child Abuse**

**Secondary prevention:** Amongst those children who had experienced a previous substantiated CPS allegation and received eight or more hours of Birth & Beyond service (n = 46), there were very positive outcomes when their parents had 24 or more hours of home visitation services; of this group (n = 22), there were no new substantiated allegations within 12 months, much lower than the countywide recurrence rate of 10%. Overall, across all children who had experienced prior maltreatment, 15% were the subject of a new substantiated allegation in 12 months (see figure below).

**Figure 4 — Percent with Substantiated Allegation 12 Months Post Intake, Among Differing Cohorts of Participants**

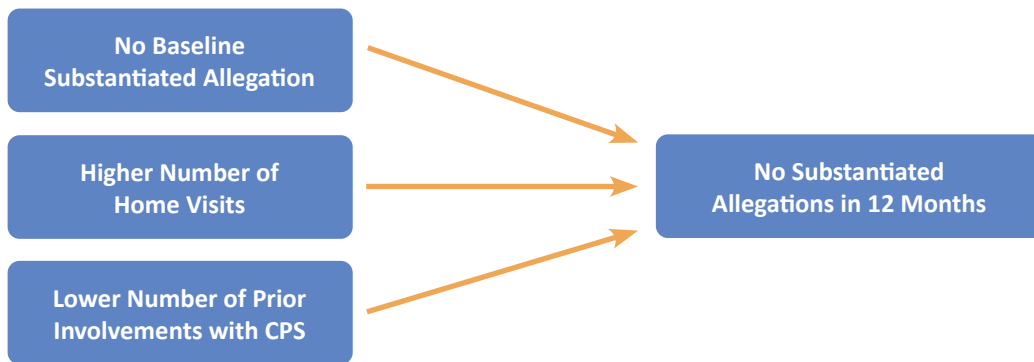


Source: Persimmony Report, Home Visiting Clients and CPS look-up.

Overall, when looking at the results across all types of participants and all dosage levels, just 3% had a substantiated CPS allegation within 12 months of their first home visit. Furthermore, the dosage of services matters; **the group who received more than 24 hours of service had the lowest likelihood of having new substantiated CPS allegations.**

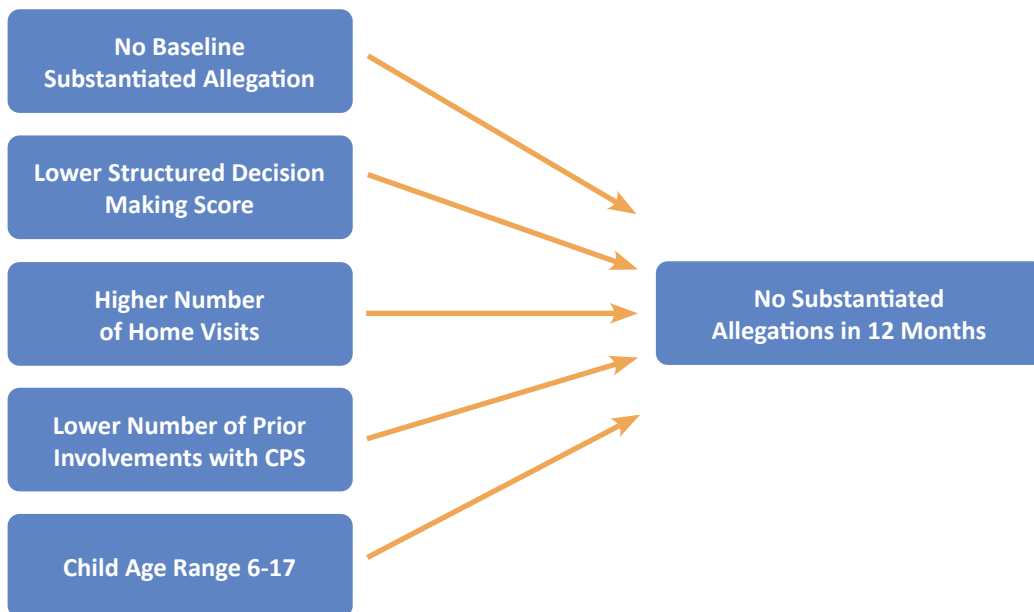
In addition to the above program and dosage outcomes, this study explored the factors that were related to, and possible statistical predictors of, having a substantiated allegation *after* beginning home visitation services. Two logistic regressions were conducted, one with all cases and one with solely the cases that were involved with CPS and had a Structured Decision Making score. The first regression, with all clients, found that **having no baseline substantiated allegation, a higher number of home visits, and a lower number of prior involvements with CPS predicted not having a new substantiated allegation in 12 months.**

**Figure 5 — Logistic Regression Predicting Substantiated Allegation 12 Months Post Intake, Among All Participants**



The second regression, with only those who were previously involved with CPS, found that **having a lower Structured Decision Making (SDM) assessment score, no previous substantiated allegation, more minutes of home visitation service, and a higher number of home visits were all independent predictors, meaning that children whose families had these factors were statistically less likely to experience a substantiated allegation of abuse within 12 months of beginning home visitation services.**

**Figure 6 — Logistic Regression Predicting Substantiated Allegation 12 Months Post Intake, Among CPS-Involved Clients**



## Highlights of Important Results:

- Reach: 5,326 parents and 2,469 children were directly served during FY 18-19
- Parenting Education Classes: All classes, except NPP Fathers, displayed statistically significant increases in AAPI scores after participation in parenting education classes.
- Home Visitation Program: One third of participants were classified into the Prevention category, while almost half of participants (48%) were classified as Intervention clients, and almost one fifth of clients (19%) were classified as Treatment clients. All three groups demonstrated statistically significant increases in AAPI scores after participation in home visitation.
- Crisis Intervention Services: Pre- and post-tests of Crisis Intervention Services clients indicated a decrease in stress, an increase in parents' knowledge about where to get help and information, as well as an increase in parents' perception of the level of support.
- CPS Outcomes: Amongst children with no prior referrals to CPS and eight or more hours of Birth & Beyond service, only .2% had a referral within 12 months of their parents beginning home visitation services. Amongst children who had been the subject of prior substantiated allegations and eight or more hours of Birth & Beyond service, 15% had a new substantiated allegation within 12 months. However, amongst those children whose parents had 24 hours or more of service, there were no new substantiated allegations within 12 months, compared to the county's 12 month recurrence rate of 10%. These findings, combined with logistic regression analyses, indicate that greater dosage is associated with reduced contact with CPS system.



# Introduction

Beginning in 1999, the Birth & Beyond Program (Birth & Beyond) has worked to provide quality community-based programs and services to prevent child abuse and neglect throughout Sacramento County. Managed by the Child Abuse and Prevention Council (CAPC), in partnership with Folsom Cordova Community Partnership, La Familia Counseling Center, Mutual Assistance Network, River Oak Center for Children, Sacramento Children’s Home, and WellSpace Health, Birth & Beyond receives funding from a variety of sources: First 5 Sacramento, the Sacramento County Department of Child, Family, and Adult Services (DCFAS), and the Corporation for National and Community Service (CNCS). First 5 Sacramento provides funding for children under the age of five and their families, while funding support from DCFAS allows Birth & Beyond to serve children ages 6-17 and their families. These two funding sources are instrumental for Birth & Beyond to be able to serve children of all ages, therefore increasing their overall reach in the community.

The Family Support Collaborative (FSC) was created in 1998 by the Sacramento County Board of Supervisors, and is a public and private community collaboration, with the goal of preventing child abuse, encouraging early intervention, and increasing treatment services for families with children. The FSC is coordinated by the Child Abuse Prevention Center (CAPC), which collaborates with the six nonprofit organizations who operate the Birth & Beyond Family Resource Centers (FRCs) and are listed above, are responsible for implementation of Birth & Beyond services in nine neighborhood FRCs. CAPC serves as the central agency for the FSC, and also manages Birth & Beyond’s extensive committee structure, conducts training, ensures fidelity to evidence-based models, and coordinates evaluation and reporting.

This report represents program operations and participant characteristics and outcomes during fiscal year (FY) 2018-19. Applied Survey Research is the evaluation consultant for Birth & Beyond and has worked closely with Birth & Beyond personnel during the year to ensure quality data collection and research practices.

This evaluation follows a **Results-Based Accountability (RBA)** framework, which measures results in terms of three indicators:

- How much did we do? (Number of people served, and number of services provided)
- How well did we do it? (Was the model/program implemented as planned?)
- Is anyone better off? (Participant outcomes)

## Birth & Beyond Programmatic Design

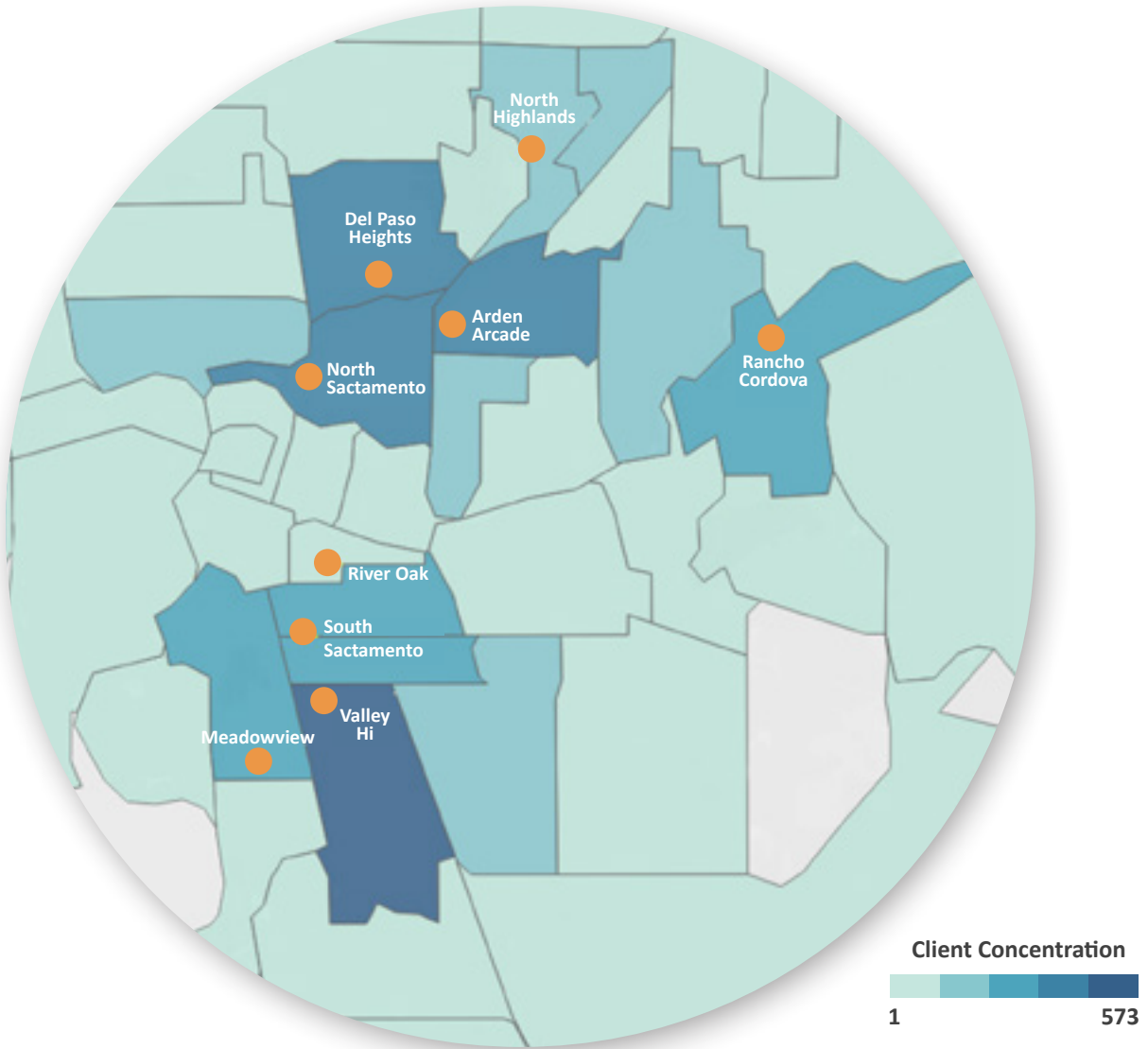
Birth & Beyond services are intended to improve the lives of children and their families, especially those from particularly at-risk backgrounds. Their services can be both stand-alone (the only service that family is receiving), or in conjunction with services from other agencies. Additionally, many families are served by multiple Birth & Beyond programs. Most services within Birth & Beyond are highly individualized and tailored to the specific needs of each family. Overall, Birth & Beyond favors a strengths-based approach to case management to maximize current skills of each participant, as well as to educate and increase skills in areas of need. Although programs are customizable to the specific needs of each family, the practices and services provided by Birth & Beyond are standardized and uniform across all nine FRCs to ensure model fidelity and high quality service for each participant.

Birth & Beyond understands and values the cultural diversity in the population that it serves, and therefore takes great care in developing staffing that mirrors their clients, in terms of demographic characteristics, language, and experience living or working in the service area. Throughout their tenure at Birth & Beyond, staff receive training, direct supervision, and experience to enhance their own personal and professional development. In addition to deliberate staffing, Birth & Beyond also strategically locate their Family Resource Centers in neighborhoods that are characterized by high birth rates, low income, and above the County averages for referrals to and substantiated reports to Child Protective Services (CPS), the greatest connection of referrals to the child welfare system for child abuse and neglect. The FRCs are located in Arden Arcade, Del Paso Heights, Meadowview, North Highlands, North Sacramento, Oak Park, Rancho Cordova, South Sacramento, and Valley Hi, and are often referred to by the name of the neighborhood within which they reside. Each FRC is operated by a corresponding nonprofit organization, based upon location. The next figure displays the location of each FRC, as well as the concentration of Birth & Beyond clients living in each area.

As may be expected, each FRC neighborhood is associated with higher concentrations of Birth & Beyond clientele. This is a result of both higher levels of need in those areas, and the increased access to services by the FRCs for those who live in the respective neighborhoods.



**Figure 7 — Family Resource Center Locations and Families Served by Zip Code**



Located throughout Sacramento County in areas of high need, all FRCs provide standard services that are complemented by unique activities and special events that reflect the characteristics of its specific neighborhood. All Birth & Beyond activities, classes, community events, family activities, and direct services are operated out of the FRCs. It is important to note that FRCs are welcoming and family-friendly environments, and are non-institutional.

Birth & Beyond services have evolved from their beginning in 1999. Originally, Birth & Beyond services solely provided home visitation case management services, which then expanded to include center-based family services, short-term crisis intervention services, and an extensive network of resources to provide to families and their children. The core services currently provided by Birth & Beyond through the FRCs include home visitation, parenting education, crisis intervention services, and enhanced core services. Home visitation clients receive direct case-management and parent education through the *Nurturing Parenting Program* model in their own homes. Parent education clients attend FRC-based workshops based upon either *Making Parenting a Pleasure* or *Nurturing Parenting Program* models. Crisis intervention clients receive intense, short-term case-management services for emergent situations, such as homelessness, food instability, domestic violence, or substance abuse. Enhanced core clients receive “light touch” services, such as FRC-based classes, events, or activities that are intended to augment other services the client is receiving, or to promote social and community engagement and therefore reduce isolation.

## Birth & Beyond's Results Based Accountability Framework


This evaluation of the Birth & Beyond program has been designed to reflect the Results Based Accountability Framework (see figure on the following page) and has been regularly updated since Birth & Beyond's conception. All services provided by Birth & Beyond are united by Birth & Beyond's Vision: "All children and families are safe, healthy and connected to a strong community." There are five components that comprise Birth & Beyond's services: Community Outreach, Enhanced Core, Parent Education, Home Visitation, and Crisis Intervention Services. The goals of overall community impact across all of these components are also included in this hierarchy. The Results Based Accountability Framework helps to guide funding decisions and priorities, as well as provides a framework for evaluation.

Figure 8 — Birth & Beyond Core Programs



Figure 9 — Birth & Beyond’s Strategic Hierarchy, FY 2018-19

## Birth & Beyond: Toward a Shared Vision of Success

Components	How Much? How Well?	Better Off?	Impact Across All Components	Vision
<b>Community Outreach</b>	<ul style="list-style-type: none"> <li>Number served at events and convenings</li> </ul>	<ul style="list-style-type: none"> <li>Increased engagement in other Birth &amp; Beyond services</li> </ul>	<b>Communities Support Children and Families:</b> <ul style="list-style-type: none"> <li>Access to healthy eating and active living</li> <li>Community events and cohesion</li> </ul> <b>Families have Protective Factors and are Resilient:</b> <ul style="list-style-type: none"> <li>Connected to services</li> <li>Connected to social supports</li> <li>Strengthened their ability to parent</li> <li>Able to prevent/address crises</li> <li>Are employed and economically stable</li> <li>Are safe</li> </ul> <b>Children are Thriving:</b> <ul style="list-style-type: none"> <li>Born healthy (weight, gestation, no tox)</li> <li>Utilizing medical and dental home</li> <li>Breastfed</li> <li>Immunized</li> <li>Enroll in early childhood education (ECE)</li> <li>Screened &amp; referred when needed</li> <li>Special needs are attended to</li> <li>Chronic conditions are managed</li> <li>Healthy nutrition</li> <li>Socio-emotional competence (PF)</li> <li>Are school ready</li> <li>Consistent attendance in ECE, school</li> </ul>	 <p>All Children and Families are Safe, Healthy and Connected to a Strong Community</p>
<b>Enhanced Core</b> <ul style="list-style-type: none"> <li>Classes</li> <li>Play Care</li> </ul>	<ul style="list-style-type: none"> <li>Number served, by service</li> <li>Number engaged in multiple Enhanced Core Services</li> </ul>	<ul style="list-style-type: none"> <li>Increased engagement in other Birth &amp; Beyond services</li> </ul>		
<b>Parenting Education</b> <ul style="list-style-type: none"> <li>Nurturing Parenting Program</li> <li>Making Parenting a Pleasure</li> </ul>	<ul style="list-style-type: none"> <li>Number served, by class</li> <li>Hours of dosage to be completed</li> <li>Completion rates per class (target: 80%)</li> </ul>	<ul style="list-style-type: none"> <li>Increased knowledge and confidence regarding parenting</li> <li>Improved attitudes toward parenting and discipline</li> </ul>		
<b>Home Visitation</b> <ul style="list-style-type: none"> <li>"Birth &amp; Beyond Classic": NPP (self-referrals or CPS referrals for Differential Response)</li> <li>CPS Aftercare</li> <li>Information and referral</li> <li>Healthy Families America</li> </ul>	<ul style="list-style-type: none"> <li>Number served</li> <li>Number screened/referred: dev. screenings, DV, mental health, etc.</li> <li>Number referred to services</li> <li>Number who access services</li> <li>Number with joint visits: CPS</li> <li>Number who complete Dosage</li> </ul>	<ul style="list-style-type: none"> <li>Increased knowledge and confidence regarding parenting</li> <li>Improved attitudes toward parenting and discipline</li> <li>Reduced referrals to CPS</li> <li>Transitioned from HVI to a signed Welfare-to-Work plan</li> <li>Participated in Welfare-to-Work Activities</li> </ul>		
<b>Crisis Intervention</b> <ul style="list-style-type: none"> <li>Family Support Plan and necessary referrals</li> <li>Information and referral</li> </ul>	<ul style="list-style-type: none"> <li>Number served</li> <li>Number who create a Family Support Plan</li> <li>Number referred for essential services: screenings, etc.</li> </ul>	<ul style="list-style-type: none"> <li>Completion of case plan goals</li> <li>Reduced stress</li> <li>Increased protective factors</li> </ul>		





# Birth & Beyond Client Profiles

During FY 2018-19, Birth & Beyond directly served 5,326 parents, 5,430 families, and 2,469 children. In addition, Birth & Beyond indirectly served 5,414 children (i.e., their parents or caregivers were served by Birth & Beyond and these children were likely positively impacted). On average, a participant in Birth & Beyond spent 10.40 hours engaged in Birth & Beyond programming. Most of Birth & Beyond’s programs offer enhanced referrals to necessary resources. The most common referrals in the overall Birth & Beyond population were: Health (i.e., insurance, medical home; 5,544), Help Me Grow (1,477), and Crisis Nursery (1,106).<sup>1</sup>

## RBA Dashboard: Birth & Beyond: Overall

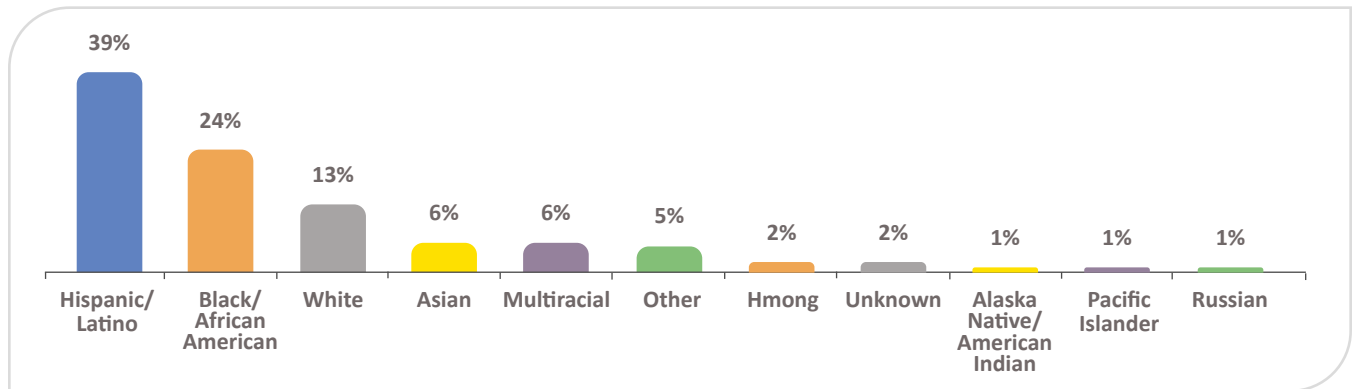
How Much Did We Do?	Numbers Served	
	Number of parents directly served across the initiative .....	<b>5,326</b>
	Number of families directly served across the initiative .....	<b>5,430</b>
	Number of children indirectly served across all services .....	<b>5,414</b>
	Number of children directly served across the initiative .....	<b>2,469</b>
	Average number of hours of direct service per client .....	<b>10.40</b>

Source: FY 2018-19. Persimmony Report By Client Demographic.

Of all Birth & Beyond clients during FY 2018-19, the most common racial identification was Hispanic/Latino (39%), followed by Black/African American (24%), and White (13%). The figure below depicts the full ethnic make-up of the Birth & Beyond population. Birth & Beyond serves a population with higher levels of minorities than Sacramento County in general, which contains White (44.2%), Hispanic/Latino (23.4%), Asian (16.9%), African American (10.9%), other (4.5%).<sup>2</sup>

<sup>1</sup> Source: FY 2018-19. Persimmony Report By Client Demographic.  
<sup>2</sup> Source: U.S. Census Bureau, 2019.

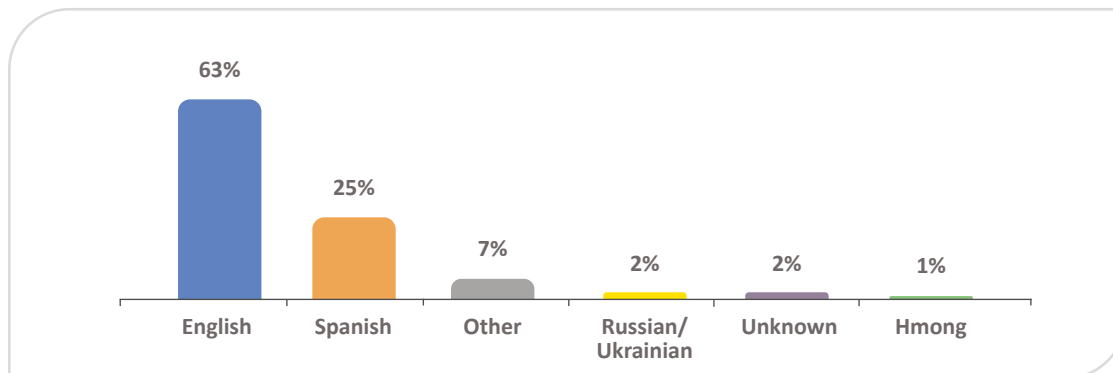
**Figure 11 — Ethnic Distribution of All Birth & Beyond Clients**



Source: FY 2018-19, Persimmony Report: By Client Demographic.

Among all Birth & Beyond clients during FY 2018-19, the most common primary language was English (63%), followed by Spanish (25%). See the figure below for the full language distribution.

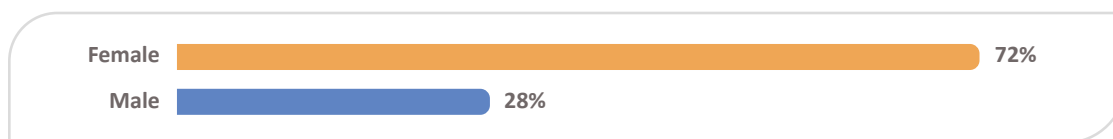
**Figure 12 — Language Distribution of All Birth & Beyond Clients**



Source: FY 2018-19, Persimmony Report: By Client Demographic.

As displayed in the figure below, the majority of Birth & Beyond participants were female. This is largely due to the fact that mothers were more involved in Birth & Beyond services than were fathers; among the 5,065 parents that had available data, 83% were mothers and 17% were fathers. Children of both genders, on the other hand, were equally likely to participate in Birth & Beyond programming; among the 2,469 children with available data, 49% were girls and 51% were boys.

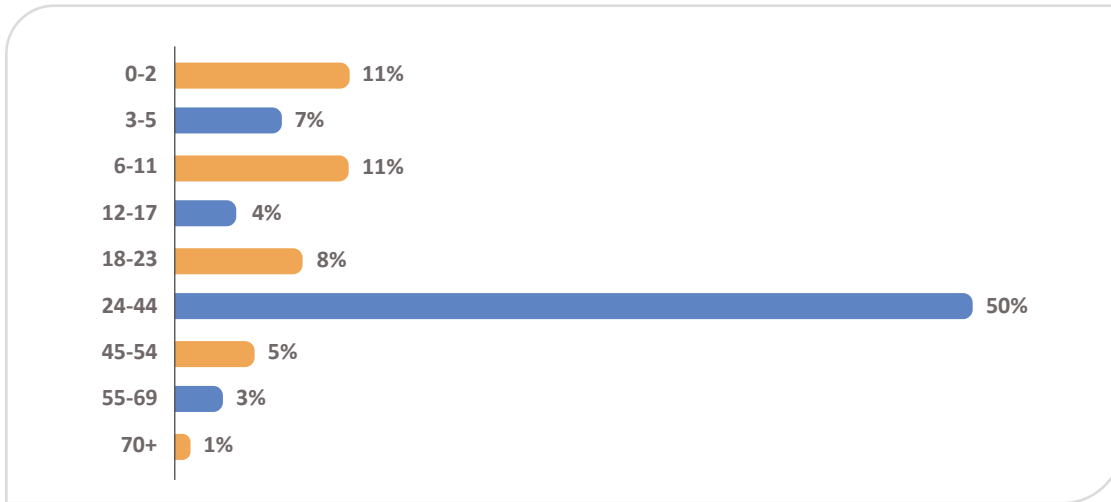
**Figure 13 — Gender Distribution Among All Birth & Beyond Participants**



Source: FY 2018-19, Persimmony Report: By Client Demographic.

The figure below displays the age range distribution among all Birth & Beyond participants, both parents and children. The most common age range of participants was 24-44 (50%), which is the primary age for becoming a parent.

**Figure 14 — Age Range Distribution Among All Birth & Beyond Participants<sup>3</sup>**



Source: FY 2018-19, Persimmony Report: By Client Demographic.



<sup>3</sup> The children listed in this graphic are those who received a direct service, not those who were indirectly impacted by Birth & Beyond services.



# Community Outreach

**Community Outreach** through events and activities at the FRCs are an essential component of Birth & Beyond. FRCs regularly host and participate in community events throughout the year. For the current report, community events were reported into the Persimmony database for only one quarter of FY 18-19, March-June 2019. In that time, there were over 450 community events with over 19,000 people in attendance. This included events like Summer School Camp, Produce For All, Egg-stravaganza, Juneteenth, Shabazz Safety Day, Aztec Dance, Refugee Support Groups, Clothes Closet, and many more.

## Event Narratives

Although the specific number of events and attendees were not recorded from July 2018- February 2019, there were narratives provided during the entire fiscal year (2018-19) from each FRC about the Community Outreach events conducted. The following are selected narratives from varied FRCs. These narratives do not comprise all of the events conducted in the fiscal year, but offer a sampling of successful highlighted events.

### ***Meadowview:***

In July 2018, Meadowview FRC hosted its second annual week-long Summer Camp. Meadowview staff, along with volunteers from E2 Church, provided daily activities to engage school-aged children and their families. Over 30 individuals participated in the Summer Camp Program, making it a very successful event.

In February 2019, the Family Resource Center hosted an annual Valentine's Date Night event. Twelve couples shared a night together, while their children enjoyed a nice meal together while in Play Care. Participating couples enjoyed a lively game of The Newlyweds to create a fun and social atmosphere.

## **Valley Hi**

Valley Hi FRC hosted its annual Back to School Celebration, in partnership with Mack Road Valley Hi Family Resource Center. The Back to School Celebration attracted over 978 participants! Parents participated in a mini resource fair that provided information on local resources to help with children's early learning. While parents were speaking with the vendors, the children participated in school readiness games and activities.

In September 2018, Valley Hi FRC and The Village Program provided the Annual Baby Block Party. The event was designed to reach parents who have recently had a baby, or who have any children under the age of five. The event consisted of vendors, games, activities, a photo booth, cake, and raffle prizes. The event was a success, with over 100 participants in attendance.

Valley Hi FRC conducted its annual Health Fair in collaboration with Shabazz Safety, as well as many other organizations in the community, with much success. The event featured free tri-tip/chicken lunches for the first 300 guests, local resources and information, face painting, drawings, performances, an Easter egg hunt, and a kids' zone. Valley Hi's event brought together over 745 attendees to enjoy the event and amenities.

## **North Sacramento:**

In December 2018, the North Sacramento FRC hosted a very successful The Grinch That Stole Christmas themed Winter Wonderland event. This was an open invitation event for all active families at the North Sacramento Family Resource Center. Approximately 300 families were in attendance, and the site welcomed six community partners who provided activities and resources for participating families. One of the highlights of the event included a member of Bikers Against Child Abuse (BACA) who dressed up as Santa, and children were able to take free pictures and receive a gift provided by North Sac. BACA also brought several of its members to the event. The members supported the event by volunteering to help with different activities, and they displayed their intricate bikes for the families in attendance.

North Sacramento FRC also hosted its second annual Juneteenth event. This event welcomed over 150 families, and there was an array of activities available, as well as parent leaders and community volunteers who came out to support the event. The success of Juneteenth was a huge highlight for the North Sacramento FRC, truly highlighting the culmination of efforts over the last two years to target events to the African American community. For North Sacramento, this was a successful effort to continue to strengthen the connection between the North Sacramento Family Resource Center and the African American community.

## **North Highlands:**

The North Highlands Family Resource Center held a successful mattress distribution event, where 60 people were identified to receive needed mattresses that were donated by a local faith-based organization.

Additionally, in collaboration with F.C. Joyce Elementary School, the Family Resource Center team planned and hosted a Winter Festival in December 2018. This event included an opportunity for families of the community and school to enjoy time together, a warm meal, photos with Santa, and an opportunity to visit 12 different arts and crafts booths, each with a different cultural theme. Children had the opportunity to learn about different countries and traditional winter games that children play in varied regions of the world. Each child left with a new book received by donation.

## ***La Familia:***

On April 28, 2019, South Sacramento FRC celebrated Día del Niño (Day of the Child) by conducting outreach, games, and activities at the Latino Center of Art and Culture.

La Familia's Mother's Pampering Event on May 31, 2019 was a huge success, with 43 moms and their children in attendance. During the event, La Familia pampered moms by doing their nails, providing hand massages, making homemade makeup wipes, and many more activities. La Familia also provided Play Care during the event, and provided families with snacks and veggies to take home, courtesy of the Sacramento Food Bank & Family Services.

On June 14, 2019, in collaboration with La Familia's youth programs, the Family Resource Center hosted a Youth & Family Day Pop-Up event. To stay lively, La Familia's Pop-Up events change each time, and this particular event had a carnival theme. The Pop-Up brought in more than 120 community members, who played carnival games, won raffles, enjoyed music, and watched a movie to promote family bonding time.

On June 28, 2019, La Familia wrapped up the busy month by hosting a Baby Shower Brunch for new moms. The attendees played games, gave away raffle prizes, and the majority of families took home donated baby items. The organization Cut-Ups provided donated baby blankets that participating moms took home as baby's first blanket.

## ***River Oak:***

River Oak FRC hosted a back to school celebration where families received backpacks filled with school supplies for their children and enjoyed fun crafts and games in the Fruitridge Community Collaborative auditorium.

River Oak FRC also hosted the quarterly graduation for home visitation clients, which had a large attendance.

## ***Folsom Cordova***

The Folsom Cordova Community Partnership (FCCP) partnered with the City of Rancho Cordova to provide free activities at the Kid's Zone for the annual 2018 Fourth of July celebration at Hagan Park. This event attracted over 20,000 people and was, again, a busy and fun-filled event, allowing FCCP to connect with community members and engage them in services.

FCCP's Annual Harvest Festival was well attended, with a total of 546 attendees, including: 177 children ages 0-5; 158 children ages 6-12; 21 children ages 13-17, and 190 adults. CalFresh, SMUD, The Children's Museum, Library, Liberty Dental, Help Me Grow, and Explore Rancho provided resources to the attendees. Mi Rancho food was served at the event, funded by a grant from the City of Rancho Cordova's Community Enhancement fund.

Another successful event was FCCP's Annual Thanksgiving Celebration for participating families, partners, and staff in November 2018, where over 200 people were in attendance. Many partners and community members convened for the meal and to volunteer in service. FCCP also partnered with Rancho Cordova Police Department for the Annual Christmas in Cordova toy event, providing gifts to 246 families in December 2018.





# Enhanced Core Services

**Enhanced Core Services** are meant to be “light touch” support measures for families who need supplemental care with other programs in which they are participating, or who are not in need of intensive service. Enhanced core services are a means to connect families to the FRCs and promote engagement with more intensive FRC services, such as home visitation or parenting education workshops. Activities in the Enhanced Core service categories include child development activities, life skill classes, peer support groups, and stress reducing activities. In FY 2018-19, there were a total of 17,703 Enhanced Core Services provided to 1,744 families. On average, families spent 12.3 hours participating in Enhanced Core Services. While parents were occupied in workshops, classes, or peer support groups, Play Care Services were offered so that their children could remain safe and happy. There were 4,834 Play Care Services provided to 1,052 children during FY 2018-19.

## RBA Dashboard: Enhanced Core Services

How Much Did We Do?	<b>Numbers Served</b>	
	Number of unduplicated families	1,744
	Number of unduplicated parents <sup>4</sup>	1,388
	First 5-funded	879
	DCFAS-funded	484
	Number of unduplicated children	1,362
	<b>Number of Services</b>	
Number of duplicated Enhanced Core Services	1,703	
Number of unduplicated children receiving Play Care Services	1,052	
Number of duplicated Play Care Services provided <sup>5</sup>	4,834	
How Well Did We Do It?	<b>Level of Service</b>	
	Number of Enhanced Core Services received by families	2,120
	Average # of hours participating in Enhanced Core Services, by family	12.3
Is Anyone Better Off?	<b>Family Engagement in other FRC Services</b>	
	Crisis Intervention (n = 373)	21%
	Home Visitation (n = 258)	15%
	Parenting Education (n = 175)	10%

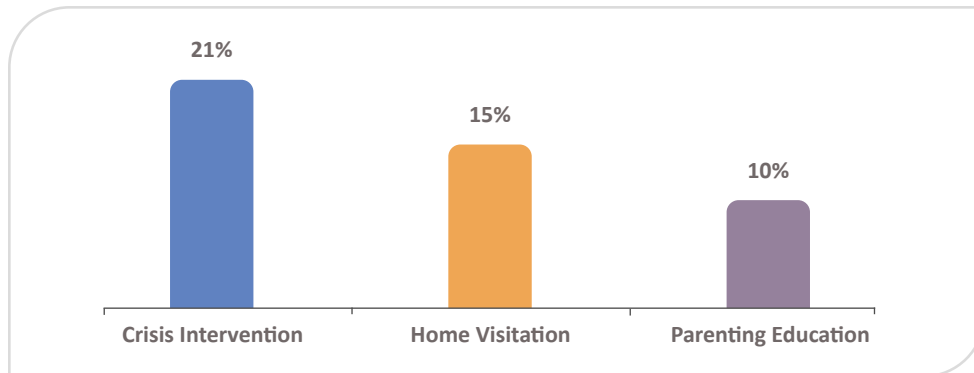
Source: FY 2018-19 Persimmony Client Reports and Exports.

<sup>4</sup> Funding information was not available for 25 parents.

<sup>5</sup> Includes Play Care services for children whose parents were attending Parent Education workshops and/or participating in Enhanced Core services.

Additionally, over one-fifth (21%) of families who were provided Enhanced Core Services also received Crisis Intervention, followed by 15% who also received Home Visitation, and 10% who also received Parenting Education (see figure below).

**Figure 16 — Enhanced Core Familial Participation in Other FRC Services**



Source: FY 2018-19. Persimmony Export: Client Service

## Success Story

North Sacramento FRC would like to highlight one of its new peer support groups, Supporting Mothers in Recovery. This group aims to provide safe, supportive spaces for mothers who are actively in recovery from drug or alcohol addiction. The group was created by two AmeriCorps members who identified this as a need, based upon the work that they had done with families within the FRC. Both members stated that through engaging families during the referral process, and through conversations at the FRC, there had been multiple requests for support groups for parents in recovery. Families expressed that the meeting times for NA (Narcotics Anonymous) were often not conducive to the needs of their families, as NA groups do not allow children, and do not offer Play Care.



While this newly-established FRC group does not offer a Recovery curriculum, it is targeted for families who are active in their recovery process, and who have completed a recovery program. The group has provided a space for women in recovery to have real-life conversations and talk about sensitive issues. There is also a self-care component to the program. It is a place where women in recovery can express themselves without fear or judgment.



# Parenting Education



**Parenting Education** classes are group-based classes conducted at Family Resource Centers. To support parent attendance, transportation services are provided, as well as Play Care services during class time. In FY 2018-19, there were 679 families and a total of 1,027 parents who attended 29 parenting workshops, while 627 children attended Play Care. Program hours per workshop ranged from 18-32 hours per workshop series. Parent beliefs about child-rearing were tested using the Adult-Adolescent Parenting Inventory (AAPi), a tool that measures risk for child maltreatment. It includes five domains: Expectations of Children, Parental Empathy Towards Children’s Needs, Use of Corporal Punishment, Parent-Child Role, and Children’s Power. Each item is scored on a scale of 1 (high risk) to 10 (low risk). Parents completed the AAPi before beginning the parenting education program and again after completion. Across both the Making Parenting a Pleasure and Nurturing Parenting Program, there were statistically significant increases in parenting knowledge and skills among participants. The FY 2018-19 findings are presented in the table below.

## RBA Dashboard: Parenting Education

How Much Did We Do?

### Numbers Served

Number of Unduplicated Parents <sup>6</sup>	1,027
First 5-funded	460
DCFAS-funded	285
Community-funded	10

### Number of Parents Who Attended Parenting Workshops<sup>7</sup>

Making Parenting a Pleasure	548
Nurturing Parenting Program: Infant, Toddler, Preschool	383
Nurturing Parenting Program: School Age	172
Nurturing Parenting Program: Fathers	23
Nurturing Parenting Program: Teen	19
Nurturing Parenting Program: Prenatal	10

### Number of Other Services

# of duplicated Play Care Services provided <sup>8</sup>	4,834
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<sup>6</sup> Funding information was not available for 272 parents.

<sup>7</sup> Some parents attended more than one workshop, which is why the total of this section is 1,155 and not 1,027

<sup>8</sup> Includes children whose parents were attending Parent Education workshops and/or participating in Enhanced Core services.

<b>How Well Did We Do It?</b>	<b>Level of Completion (% who had a post survey)</b>		
	Nurturing Parenting Program: Teen <sup>9</sup>	100%	
	Nurturing Parenting Program: Prenatal	86%	
	Nurturing Parenting Program: School Age	84%	
	Nurturing Parenting Program: Fathers	74%	
	Nurturing Parenting Program: Infant, Toddler, Preschool	71%	
	Making Parenting a Pleasure	64%	
<b>Is Anyone Better Off?</b>	<b>Increased Level of Parenting Knowledge and Skills (AAPI)</b>		
		<b>Pre</b>	<b>Post</b>
	Nurturing Parenting Program: Prenatal (n = 3 matched sets)*	5.49	6.52
	Nurturing Parenting Program: Infant, Toddler, Preschool (n = 202 matched sets) *	5.52	6.29
	Nurturing Parenting Program: School Age (n = 102 matched sets) *	5.45	6.35
	Making Parenting a Pleasure (n = 241 matched sets) *	5.82	6.53
	Nurturing Parenting Program: Fathers (n = 16 matched sets)	5.95	6.28
	<b>Family Engagement in other FRC Services</b>		
	Crisis Intervention (n = 319)		47%
	Enhanced Core (n = 190)		28%
Home Visitation (n = 63)		9%	

Source: FY 2018-19 Persimmony Client Reports and Exports. \* Indicates statistically significant difference at p < .05

## Making Parenting a Pleasure

Making Parenting a Pleasure (MPAP) is a research- and evidence-based parenting curriculum that addresses key topics including self care, stress and anger management, understanding child development, communication skills, and positive discipline. MPAP is group-based and discussion-focused and typically consists of 13 modules.

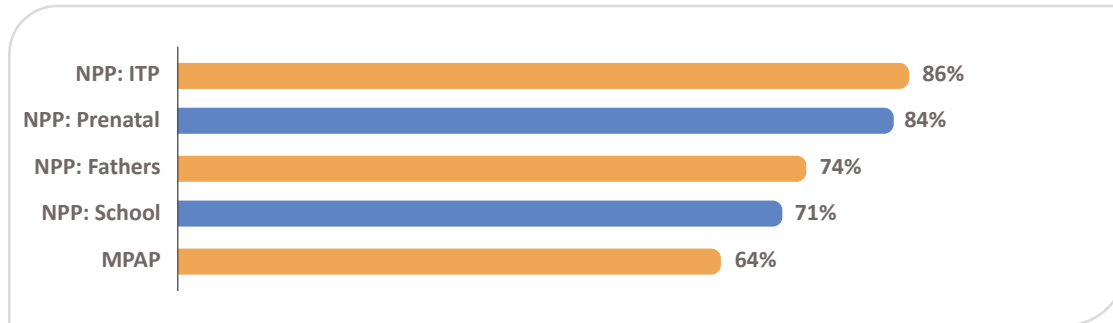
## Nurturing Parenting Program

The Nurturing Parenting Program (NPP) is an evidence-based model aimed to increase nurturing parenting skills as an alternative to potentially abusive or neglectful parenting practices. NPP can be taken as a group course or individualized lessons. Birth & Beyond offers NPP as a group course in its parenting education program, and through individualized lessons in its home visiting program. In FY 2018-19, Birth & Beyond offered multiple NPP courses that were designed to provide different information based upon the age(s) of children and the gender of the parent. The NPP courses that were offered were: NPP Fathers, NPP Prenatal, NPP Infant/Toddler/Preschool (ITP), and NPP School Age. The course that received the highest levels of parent attendance was NPP ITP, followed by NPP School Age.

The workshops with the highest completion rate (at least 80% of classes) were the Nurturing Parenting Program Prenatal (86%), the Nurturing Parenting Program School Age (84%), and Nurturing Parenting Program Fathers (74%) (see figure below).

<sup>9</sup> There was only one participant who had both pre and post survey data for this course. Interpret results cautiously.

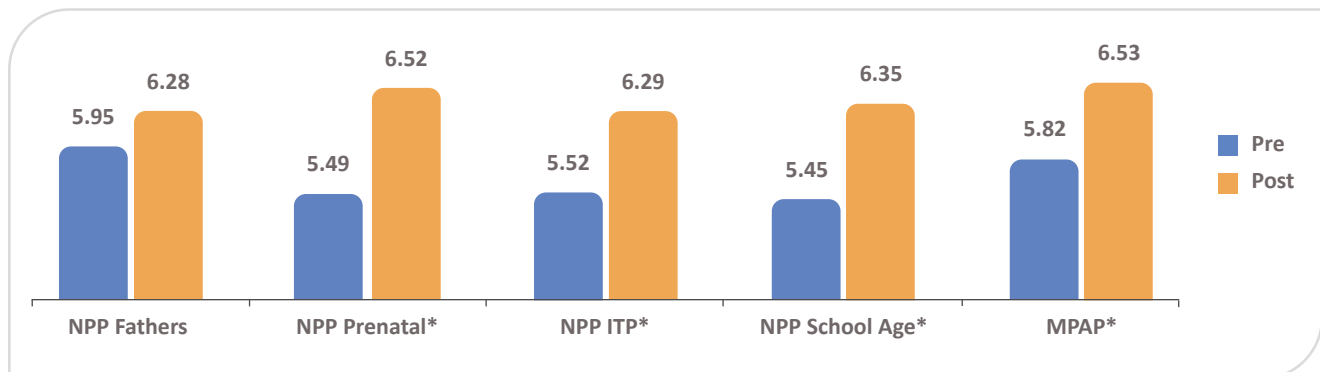
**Figure 18 — Level of Completion for Each Parenting Education Class**



Source: FY 2018-19. Persimmony Export: Client Assessment by Answer Value.

The following figure demonstrates the increases in parenting knowledge and skills, using the Adult-Adolescent Parenting Inventory. Overall, there were increases in parenting knowledge and skills across all NPP programs, but NPP Prenatal, NPP ITP, and NPP School Age displayed statistically significant increases between pre- and post-test.

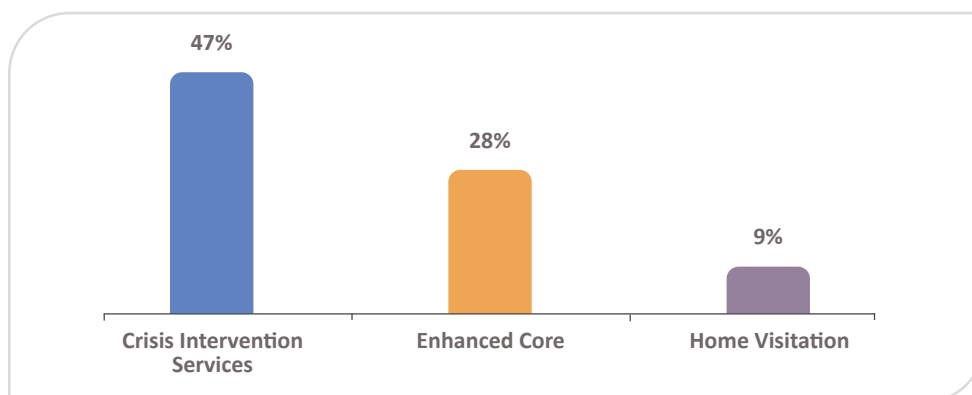
**Figure 19 — Changes in Parenting Knowledge and Skills, Before and After Participation in an NPP Program**



Source: FY 2018-19. Persimmony Export: Client Assessment by Answer Value. \* Indicates statistically significant difference at  $p < .05$

Additionally, almost half (47%) of families who were provided Parenting Education Services also received Crisis Intervention Services, followed by 28% who also received Enhanced Core Services, and 9% who also received Home Visitation (see figure below).

**Figure 20 — Parenting Education Participants' Engagement in Other FRC Services**



Source: FY 2018-19. Persimmony Export: Client Service

## Success Story

Maria<sup>10</sup>, a mother of three children, aged one, three, and eight years old, attended the Nurturing Parenting Program workshop after she was referred by Child Protective Services, and was facing court for custody to be granted to the other parent. In the first NPP session, Maria disclosed that there were many things that seemed to be going wrong for her, due to her decisions in the past. She was vocal about how her children's father was at fault for putting her in this situation, and stated that drugs and homelessness put her in a state of "survival mode".

As the sessions moved along, in addition to the lesson topics, the Family Resource Aide began sharing experiences regarding their own childhood, disciplinary practices, and the impacts these experiences had on how they parented their own son. During the middle of the program, Maria began to ask more questions. Over time, Maria began to take notes, as well as became more honest about her situation. The Family Resource Aide was able to build a strong rapport and connection with Maria, and saw her transition into a mother who was eager to find the tools to make her family as successful as possible. Maria eventually recognized and shared that she was in her current situation due to her own actions, and that she needed to change to have a better outcome. Maria was able to take responsibility for being chronically late, and not accomplishing her homework or motherly duties, and genuinely felt remorse for not applying herself, and setting a poor example for her children.



Due to missing classes during the Nurturing Parenting Program, Maria had to make up some lessons. After scheduling and attending make up lessons, the Family Resource Aide saw a shift in this mother; she was able to understand and employ the tools that were shared in the class. Maria shared that she will no longer let difficulties control what type of parent she will be to her children, and she was no longer going to be a victim. Maria finished the program and shared she would be getting her children out of foster care in two weeks.

<sup>10</sup> Names have been changed and stock photos are used to protect the anonymity of those involved in success stories.

# Home Visitation



The **Home Visitation program** through Birth & Beyond uses the Nurturing Parenting Program (NPP), an evidence-based home visitation curriculum provided at least weekly, with a minimum of two months of visitation services. In FY 2018-19, 1,515 parents engaged in home visitation services. Participants were screened using the Adult Adolescent Parenting Inventory (AAPI), a tool that measures risk for child maltreatment. It includes five domains: Expectations of Children, Parental Empathy Towards Children’s Needs, Use of Corporal Punishment, Parent-Child Role, and Children’s Power. Each item is scored on a scale of 1 (high risk) to 10 (low risk).

## RBA Dashboard: Home Visitation Services

How Much Did We Do?

### Numbers Served

Number of unduplicated parents who received home visits through NPP <sup>11</sup>	1,515
First 5-funded	1,094
DCFAS-funded	238
Number of unduplicated families served	1,221
Number of unduplicated children served	2,258
Number of unduplicated parents who developed a Family Nurturing Plan (in FY) <sup>12</sup>	568
Number (%) of parents referred by CPS	217 (14%)

### Program Assignment

Percent who were assigned to Prevention (low risk; n = 74)	33%
Percent who were assigned to Intervention (moderate risk; n = 109)	48%
Percent who were assigned to Treatment (high risk; n = 43)	19%

### Number of Unduplicated Families Who Received Joint Visits With:

Health Liaison	281
CPS	251

### Help Me Grow Screenings

Number of children whose screening indicated a developmental need (“below cutoff”)	94
Number of children with developmental needs who received a referral	27

<sup>11</sup> Funding information was not provided for 183 parents.

<sup>12</sup> It is important to note that since families could have begun NPP lessons in the previous fiscal year, this number does not represent all families who had a Family Nurturing Plan.

**How Well Did We Do It?**

**Mean Number of Lessons Completed**

Prevention Clients (n = 18) .....	<b>9.00</b>
Intervention Clients (n = 15) .....	<b>9.87</b>
Treatment Clients (n = 10) .....	<b>5.66</b>

**Is Anyone Better Off?**

**Percent of Parents Who are Connected and Supported**

*(Percent who agree or strongly agree at pre/post; n = 117 matched sets)*

	<b>Pre</b>	<b>Post</b>
I am confident in my ability to help my child grow and develop .....	<b>86%</b>	<b>84%</b>
I know what to expect at each stage of my child's development .....	<b>60%</b>	<b>65%</b>
I know what program to contact in my community when I need help for basic needs (e.g. housing, food, employment)* .....	<b>62%</b>	<b>79%</b>
I know what program to contact in my community when I need advice on how to raise my child* .....	<b>68%</b>	<b>88%</b>

**Improved Parenting (Adult Adolescent Parenting Inventory)<sup>13</sup>**

	<b>Pre</b>	<b>Post</b>
Prevention Group (Low risk; n= 51)* .....	<b>5.82</b>	<b>6.92</b>
Intervention Group (Moderate risk; n= 71)* .....	<b>5.38</b>	<b>6.49</b>
Treatment Group (High risk; n= 25)* .....	<b>3.70</b>	<b>5.38</b>

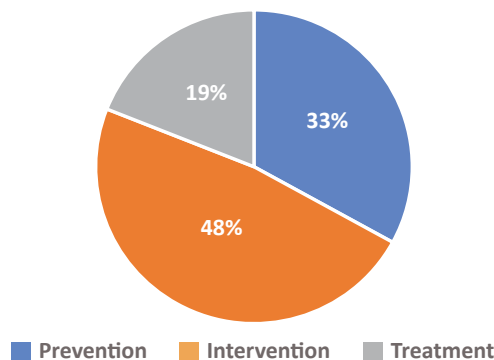
**Substantiated Maltreatment 12 Months After First Home Visit, Ages 0-5, by Subpopulation<sup>14</sup>**

Children with no prior CPS contact (n= 842) .....	<b>&lt;1%</b>
Children with any prior CPS contact (n = 805) .....	<b>8%</b>
Children with a substantiated baseline referral (n = 91) .....	<b>20%</b>
All groups (n = 1,647) .....	<b>4%</b>

Source: FY 2018-19 Quarterly Performance Measures report in Persimmony, and Family Information Form. \* Indicates statistically significant difference.

After completion of the AAPI, Birth & Beyond categorized the participants based upon their scores and the level of risk for child abuse or neglect. There are three categories that then determine the required number of NPP lessons: Prevention (low risk for perpetrating child abuse/neglect, 16 required lessons); Intervention (moderate risk for perpetrating child abuse/neglect, 24 required lessons); and Treatment (high risk for perpetrating child abuse/neglect, 55 required lessons). One third of participants were classified into the Prevention category, while almost half of participants (48%) were classified as Intervention clients, and almost one fifth of clients (19%) were classified as Treatment clients (see figure below).

**Figure 22 — Level of Nurturing Parenting Program Home Visitation**



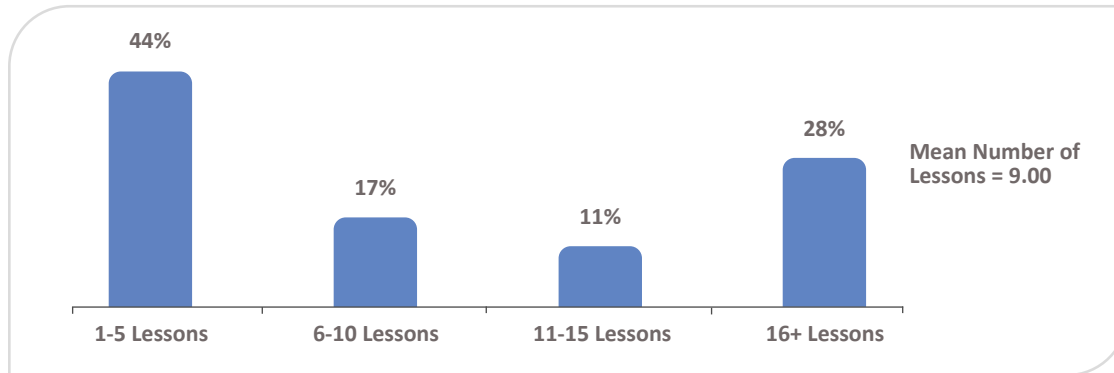
Source: FY 2018-19. Persimmony Export: Client Service, n=226

<sup>13</sup> Scores are among those who had both pre- and post-data.

<sup>14</sup> These data were provided by CPS and include families who were served between March 2018 and February 2019.

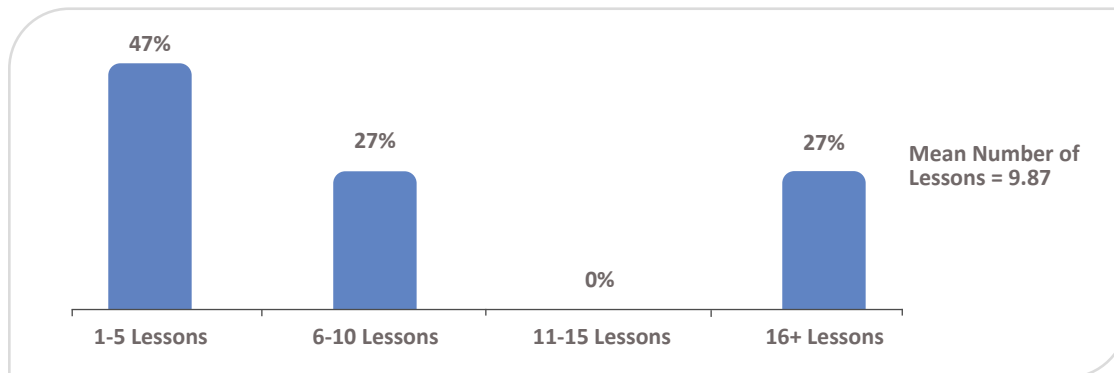
In terms of the number of lessons completed by assigned group, 28% of Prevention clients completed 16 or more lessons, while 27% of Intervention clients completed 16 or more lessons, and 20% of Treatment clients completed 16 or more lessons. It is also important to note that these results should be interpreted cautiously, as there were high amounts of missing data for number of lessons completed and therefore the sample size for each group is quite low.

**Figure 23 — Number of NPP Lessons Completed, Prevention Group**



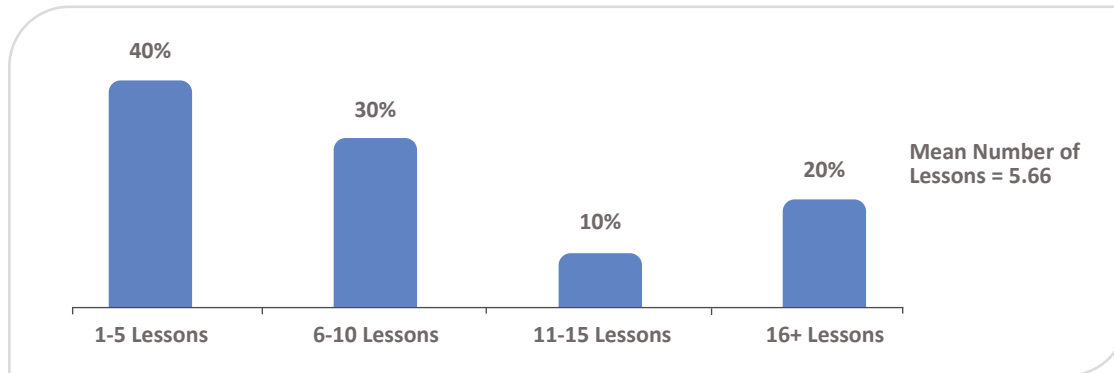
Source: FY 2018-19. Persimmony Export: Client Service, n = 18.

**Figure 24 — Number of NPP Lessons Completed, Intervention Group**



Source: FY 2018-19. Persimmony Export: Client Service, n = 15.

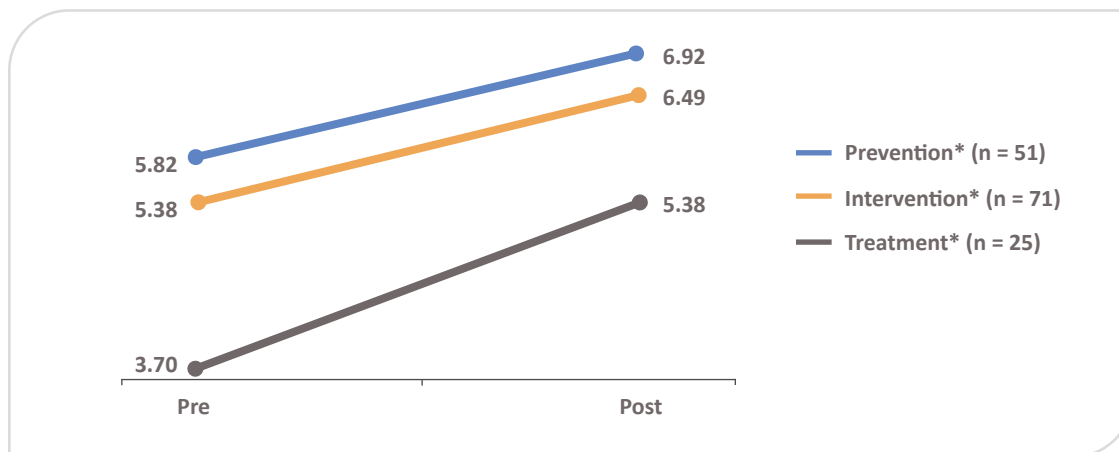
**Figure 25 — Number of NPP Lessons Completed, Treatment Group (N = 10)**



Source: FY 2018-19. Persimmony Export: Client Service, n = 10.

The two figures below display changes in parenting knowledge, confidence, and attitudes before and after participation in the NPP Home Visiting Program. The first figure displays differences in overall AAPI scores, by program assignment. There were statistically significant increases in all groups, no matter the risk-level.

**Figure 26 — Increases in AAPI Scores Before and After NPP Home Visitation, by Program Assignment**



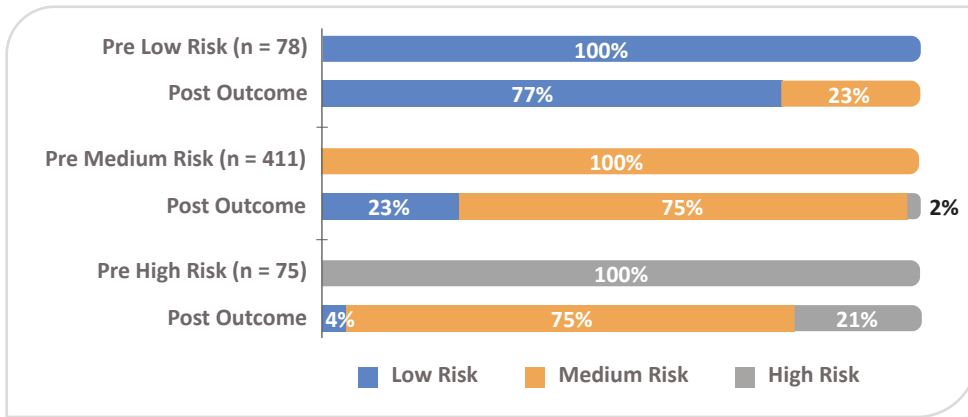
Source: FY 2018-19 Adult Adolescent Parenting Inventory, Persimmony Export: Client Assessment by Answer Value.  
 \* Indicates statistically significant change.

The following chart displays the change in AAPI risk level, before and after the NPP program. AAPI risk levels were calculated as follows: low risk composite score greater than 7.5, medium risk composite score between 3.5 and 7.4, high risk composite score under 3.5. Notably, 75% of those who were classified by the AAPI as “high risk” at the beginning of the program were classified as “medium risk” by the end of the program.

<sup>15</sup> There were many cases (n = 338) that were not given an NPP designation in Persimmony but did have completed pre- and post-AAPI assessments. Many of these cases were labeled as Intake, but not updated with the NPP classification.



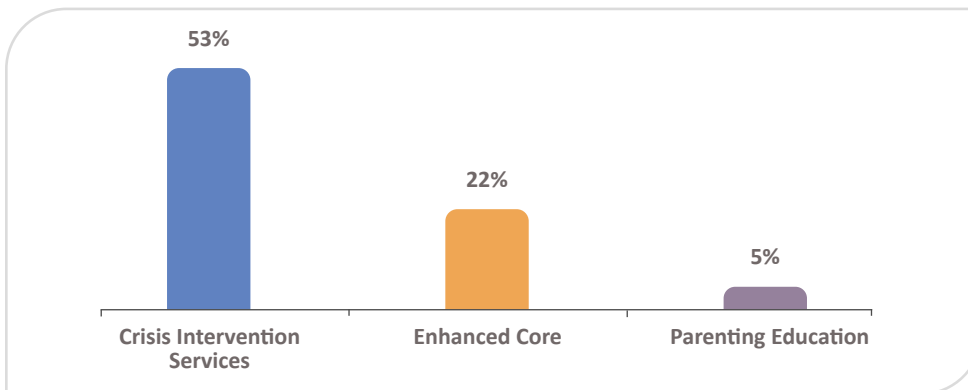
**Figure 27 — Changes in Parental AAPI Risk Level<sup>15</sup>**



Source: FY 2018-19 AAPI Scores, n = 564 matched sets with both pre and post scores.

Additionally, over half (53%) of families who were provided Home Visitation Services also received Crisis Intervention Services, followed by 22% who also received Enhanced Core Services, and 5% who also received Parenting Education (see figure below).

**Figure 28 — Home Visitation Participants' Engagement in Other FRC Services**



Source: FY 2018-19. Persimmony Export: Client Service

## Success Story

Mark<sup>16</sup> entered the Folsom Cordova Family Resource Center in July 2018 hoping to change his family's circumstances. Mark was a single, unemployed, homeless father of 14 children, 5 of whom resided with him in a shelter. The children ranged in ages from 4 to 15 years old. Mark had what he characterized as a "rough beginning" in life. He said that in the past, he was prone to start fights, just because someone looked at him in a certain way. He wore an ankle monitor due to repeated DUI infractions. He also had several brushes with Child Protective Services.

Mark began parenting classes at the Family Resource Center and quickly requested Home Visitation as well. He went on to complete 7 parenting lessons at Folsom Cordova and 26 lessons with his Home Visitor, Diego. According to Folsom Cordova staff, Mark was an avid student and applied many of the concepts presented to him. He became thoughtful in how he responded to his children's misbehavior. Mark shared that he noticed as he changed his parenting style, the children responded with improved behavior and seemed happier.

Mark's health was seriously compromised during his time with Birth & Beyond. When he revealed he was taking 10 different medications, the Home Visitor arranged to have a Health Educator/nurse attend a home visit. The Health Educator was able to answer questions that Mark had about his various health challenges. As an outcome of the visit, he updated the children's immunizations and got a flu shot for himself. He also attended to everyone's dental health. Additionally, Mark began looking ahead to plan for who would take care of his children in the event he was not around.

Mark also requested support on needs related to school and afterschool activities. Mark was given information about what was available for his children in the community and at the library. The School Readiness Home Visitor provided information about Beanstalk and Child Action. She performed developmental screening tests and gave Mark exercises that would foster his children's development.

She also gifted a book to each child to promote reading as a family. Folsom Cordova's annual backpack giveaway provided all five children with backpacks filled with school supplies. They began the school year well prepared for success.

Mark secured a job, which he traveled to by bicycle. After some time and saving, he purchased a car. He began to buy little "extra" items for his children with pride. During the holidays, he was "adopted" by a generous local charity and received gifts for all of the children. He was very excited and pleased that the children would be having such a good holiday. He even planned a big holiday meal for the family.

He continued to work his program and moved out of the shelter in May 2019. He moved the family into a house, where all of the children had more room and a big back yard to play outside in the fresh air. While in the program, Mark has had no additional referrals to Child Protective Services.



<sup>16</sup> Names have been changed and stock photos are being used to protect the anonymity of those involved in success stories.



# CalWORKS Home Visitation

In Spring 2019, Birth & Beyond was awarded a multi-year grant through a Sacramento County competitive process to provide home visitation services to families receiving CalWORKs. The California Department of Social Services allocates funding to the Sacramento County Department of Human Assistance, who has a revenue agreement with First 5 Sacramento for the coordination, oversight, and monitoring for the State Home Visitation Initiative. First 5 Sacramento then entered into a contract with CAPC to fund Birth & Beyond to implement the program. This program began in April 2019 and therefore was only operational for three months of the 18-19 fiscal year. Because CalWORKs was operating for such a small amount of time, data is not published in this report.

## Healthy Families America

Birth & Beyond receives referrals from the Sacramento County Department of Human Assistance and uses the evidence-based home visitation model known as Healthy Families America (HFA). Enrollment in HFA is restricted to mothers who are pregnant or have an infant up to three months of age. By using the HFA model, Birth & Beyond hopes to identify and address family and child hardships to reduce stress in the home, nurture positive parent-child interactions, and improve family stability.



# Crisis Intervention Services

**Crisis Intervention Services (CIS)** are intended to be brief, targeted services for Birth & Beyond clients who are experiencing a pressing concern or issue. The CIS team conducts an intake with a brief assessment to measure parent stress levels at the time their CIS case opens. Case management and referrals to Family Resource Centers and the Crisis Nursery, as appropriate, are provided to the parents. In FY 2018-19, Crisis Intervention Services served 2,657 parents and provided 2,026 (or 84% of) parents with at least one referral or linkage.

## RBA Dashboard: Crisis Intervention Services

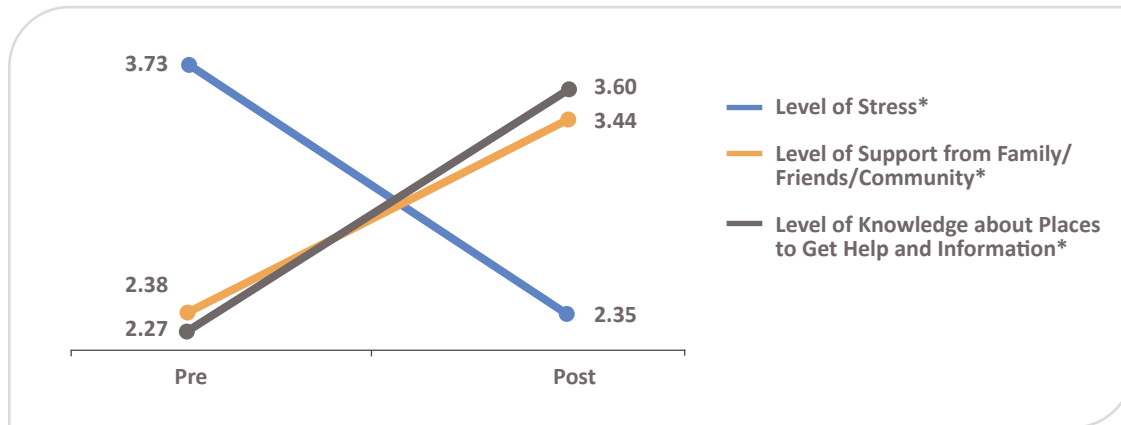
How Much Did We Do?	Numbers Served	
	Number of unduplicated parents with Intervention Service Record <sup>17</sup>	2,657
	First 5-funded	1,515
	DCFAS-funded	736
	Community-funded	0
	Number of unduplicated families served	2,403
	Number of unduplicated families with pre-assessment (ISR Stress Assessment)	1,439
	Number of unduplicated families with post-assessment (ISR Stress Assessment)	1,262
How Well Did We Do It?	Level of Completion	
	Number (%) of unduplicated families with at least one referral/linkage	2026 (84%)
	Number of unduplicated families with a Crisis Intervention Case Management Plan	478
	Stress Reduction <sup>18</sup>	
	Level of stress*	Pre 3.73   Post 2.35
	Level of support from friends/family/community*	2.38   3.44
	Level of knowledge about places to get help and information*	2.27   3.60
	Families Who also Participated in Other FRC Services	
	Home Visitation (n = 647)	27%
	Parenting Education (n = 330)	14%
	Enhanced Core (n = 443)	18%
	Play Care (n = 224)	9%

Source: FY 2018-19 Quarterly Performance Measures report in Persimmony. Crisis Intervention Services Pre/Post test.  
 \*Indicates statistically significant change at p < .05. Changes in Stress and Support: source – Family Development Matrix.

<sup>17</sup> Funding information was unavailable for 251 parents.  
<sup>18</sup> Data assessed includes 1,262 matched sets.

Pre- and post-tests of Crisis Intervention Services clients indicated a decrease in stress, and an increase in parents' knowledge about where to get help and information, as well as an increase in parents' perception of the level of support they have among their family, friends, or in their community (see the following figure).

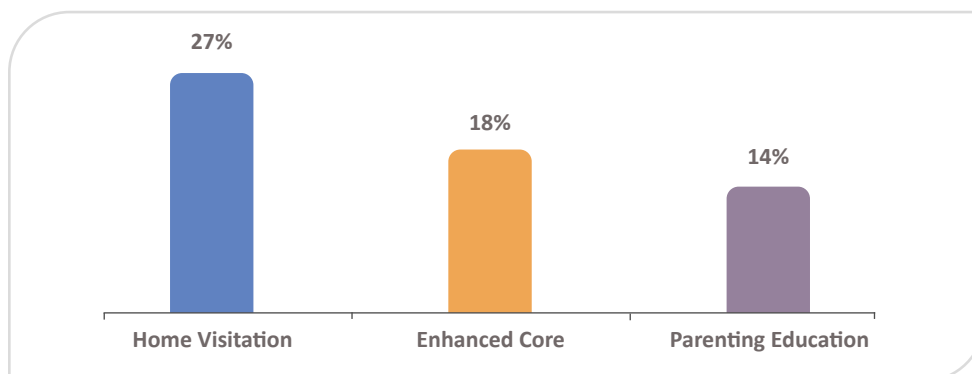
**Figure 30 — Ratings of Stress, Support, and Knowledge, Before and After Participation in Crisis Intervention Services**



Source: FY 2018-19 Quarterly Performance Measures report in Persimmony. Crisis Intervention Services Pre/Post test. \*Indicates statistically significant change at  $p < .05$ . Changes in Stress and Support: source – Family Development Matrix. Outcomes on a scale of 1 to 5: 1=none, 3=some, 5= a lot.

Additionally, over one quarter (27%) of families who were provided Crisis Intervention Services also received Home Visitation, followed by 18% who also received Enhanced Core Services, and 14% who also received Parenting Education (see figure below).

**Figure 31 — Crisis Intervention Services Participants' Engagement in Other FRC Services**



Source: FY 2018-19. Persimmony Export: Client Service

## Success Story

Dean<sup>19</sup>, the father of a 3-year-old autistic son, was referred to Mutual Assistance Network Arden-Arcade by Child Protective Services. At the time of the initial meeting, Dean was at risk for housing eviction, and was overwhelmed mentally, physically, and emotionally. Dean disclosed that he was diagnosed with autism, anxiety, and depression, and that he had “bad experiences” with ciswomen, because Dean is transgender.

Dean began to engage in Home Visitation services. Dean shared that he was at risk of being homeless, in addition to having an autistic child, being a caretaker for his elderly parents, and having autism himself; understandably, he found it difficult to concentrate on the parenting lessons. At his home visitor’s suggestion, Dean agreed to Crisis Intervention case management services.

While providing Dean with both Crisis Intervention and Home Visitation services, there was a need for a secondary Child Protective Services referral to be made to assist and provide the father with further resources. With the help of Child Protective Services intervention, the Home Visitor and the Crisis Intervention Specialist assisted the father with enrolling in Crisis Nursery to ensure an alternate way to attend to his child’s pressing needs, so that Dean could tend to his own.


When Dean had to get surgery, he was able to place his child in the Crisis Nursery, with special care given for the child’s needs. The child stayed at Crisis Nursery for about two weeks, with Dean, the grandfather, and the grandmother checking in with the case manager. Dean stated that it really helped him with his recovery and his mental state to know that his child was in a safe and nurturing place.

Dean stated that he could not believe that there were agencies who would commit themselves to following up and following through with families. He was most surprised after completing a Crisis Nursery Tour, because he had initially declined to utilize their services, without a second thought. After taking the tour and seeing the excellent care that would be given to his special needs child, he felt more at ease to utilize them for his surgery.

Soon after, Dean moved into a new place, and was given news that his mother was approved to have a nurse come by a few days a week in order to help with her needs. Dean said that this helped alleviate a lot of stress from caring for his mother, his son, and himself. He completed Crisis Intervention services and his case was closed out soon after.



<sup>19</sup> Names have been changed and stock photos have been used to protect the anonymity of those involved in success stories.



# Child Protective Services Outcomes

One year after enrolling the first family into home visitation services (2001), Birth & Beyond began tracking child welfare outcomes in relation to their programming dosage. These outcome reports are compiled and presented through a cooperative agreement between the evaluator (Applied Survey Research), the Sacramento County Department of Child, Family, and Adult Services (DCFAS), and Child Protective Services (CPS). The main objective from this study was to better understand how different levels of involvement with Birth & Beyond services (prior to intake, between intake and closure, and post-closure) may impact future involvement with Child Protective Services.

In the past, this study has focused on parental outcomes related to participation in Birth & Beyond home visitation services. However, this constricts the analysis by not allowing for child-by-child differences (i.e., a parent could potentially abuse more than one child in the family, or a parent may have multiple children and only have an allegation against one of them), thus making the results per parent, as opposed to individualized per child. In addition, county, state, and federal child abuse rates are calculated at the child-level. Therefore, the current report analyzes CPS allegations on a child-level. This change to analyze and report child abuse statistics from the Birth & Beyond population allows for county, state, and federal comparison, as well as to improve the accuracy of the reported data.

## Characteristics of CPS Study Cohort

For this report, the 6 month and 12 month outcomes were tracked for children whose families had intakes between March 1, 2018 and February 28, 2019. Data were obtained from CPS in September 2019, which allowed for even the latest intakes in February 2019 to have six month recurrence data.

There were a total of 2,258 children aged 0-17 included in the CPS Study Cohort, amongst whom 37% were Hispanic/Latino (n=836), followed by Black/African American (587 or 26%) and White (362, or 16%).

Of those with dosage data, over three-quarters (78%) of the study cohort had more than 8 hours of home visitation services, with an average of 27 hours (minimum 30 minutes, maximum 171 hours).

## CPS Outcomes<sup>20</sup>

Of special interest were the home visitation participant outcomes after beginning the program, both 6 and 12 months after the first home visit. This study sought to examine two specific program outcomes: Would the Birth & Beyond home visitation program have a positive impact and keep more families out of Child Protective Services? Additionally, did the amount of Birth & Beyond home visitation hours impact outcomes? Of the families who participated in Birth & Beyond home visitation, 50% had some prior contact with CPS, which makes this population much higher-risk than the general county population. Nevertheless, it was important to compare Birth & Beyond CPS Outcomes to countywide rates to better understand how the Birth & Beyond population compare to the overall county rates.

Because there were many avenues to be referred to Birth & Beyond home visitation services (for example CPS, self-referral, hospital, etc.), it was necessary to measure outcomes for four different cohorts of clients:

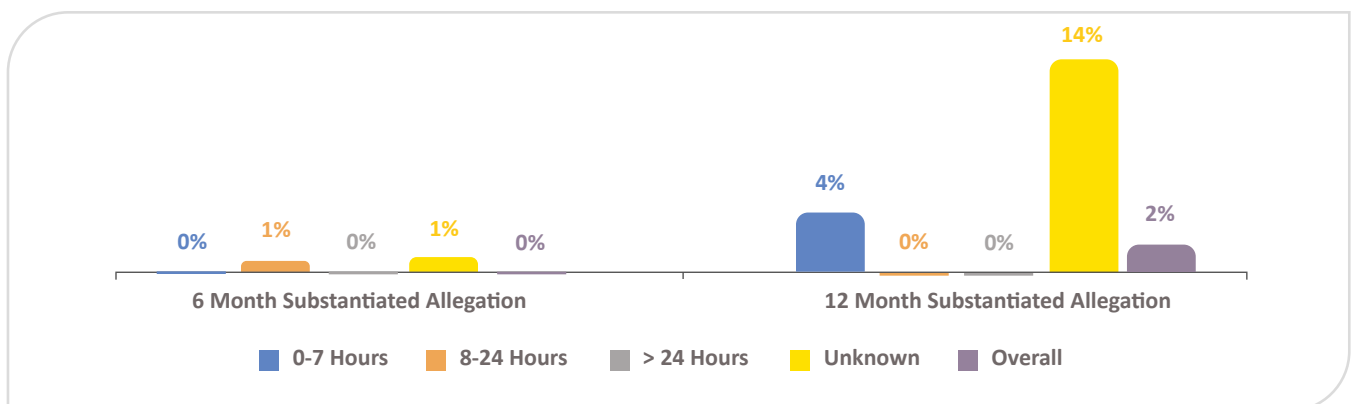
- No Prior CPS Involvement
- CPS-Involved with a Prior Substantiated Allegation
- CPS-Involved with a Prior Allegation (not substantiated)
- Any Prior CPS Involvement in the Past 5 Years (this includes the previous two groups, as well as those who do not have a known disposition).

The findings are presented below.

### Clients with No Prior CPS Involvement (Primary Prevention)

Of those children who did not have any reported CPS involvement (6 months n = 714; 12 months n = 462), there were very low rates of CPS substantiated allegations post-involvement in the home visitation program. There were very few differences depending upon dosage level for this group, except for those with unknown dosage levels who had a very small sample size (n = 29; see figure below). These results showcase that Birth & Beyond has largely been successful in its goal of the prevention of child abuse.

**Figure 32 — Percent of Children with a Substantiated CPS Allegation 6 and 12 months after Intake, by Dosage of Service (Cohort: Prevention Population)**



Source: Persimmony Report, Home Visiting Clients and CPS look-up. 6 Month N=714; 12 Month N = 462

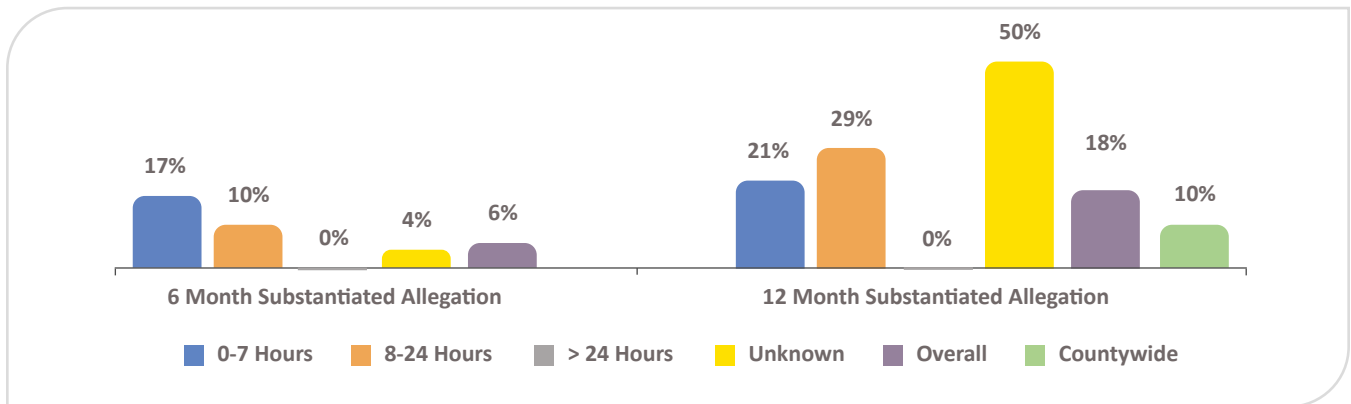
<sup>20</sup> All of the percentages in the following charts represent the percentage of those in each specific dosage group who had a substantiated allegation. The percentages should *not* be interpreted as the total percentage of the overall substantiated rate and this is why the percentages do not add up to 100%.



## Clients with Prior Substantiated Allegations

Of those children who had a previous substantiated allegation from CPS (6 months n = 143; 12 months n = 62), there were very positive outcomes among those who had 24 or more hours of home visitation. Of this group, there were 0 new substantiated allegations in both 6 and 12 months. Additionally, although the “unknown dosage” level for the 12 month category looks alarmingly large (50%), this was a function of low sample size (n = 2) for that category. For the entire cohort of children, 6% had a new substantiated allegation in 6 months and 18% had a new substantiated allegation in 12 months (see figure below). This is higher than the reported countywide percentage of recurrence (10%).

**Figure 33 — Percent of Children with a Substantiated CPS Allegation 6 and 12 months after Intake, by Dosage of Service (Cohort: Prior Substantiated Allegation)**

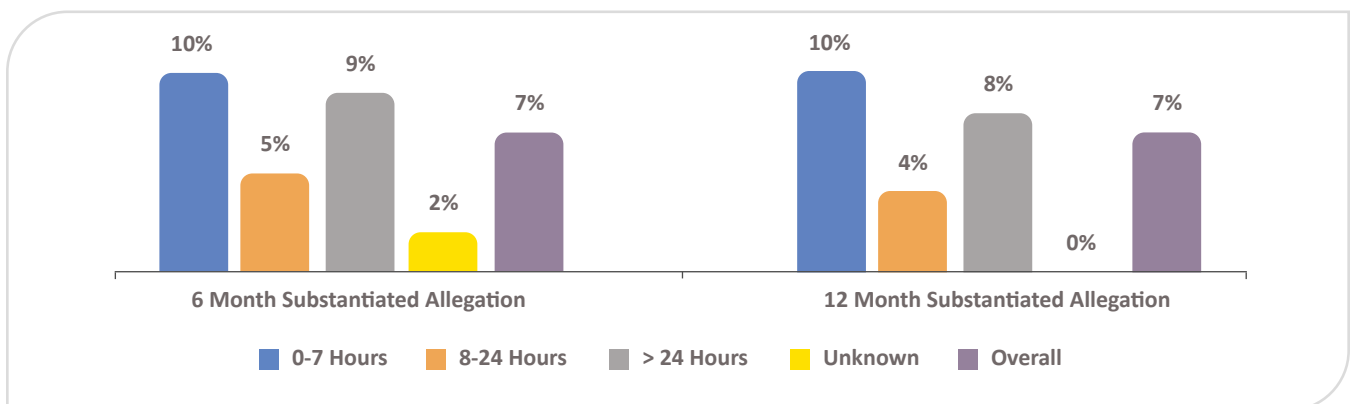


Source: Persimmony Report, Home Visiting Clients and CPS look-up. Note: Results from the 16-24 dosage bracket were largely affected by two families, each with 4 children, who reoffended within the 12 months following their first intake to home visitation. Due to the small sample size, this accounts for the large spike at 16-24 hours of dosage. Data have therefore been combined to create a service bracket of 8-24 hours. 6 Month N=143; 12 Month N = 62.

## Clients with Prior Unsubstantiated Allegations

Of those who had a previous CPS allegation that was determined “not substantiated” (6 months n = 524; 12 months n = 170), the dosage of Birth & Beyond home visitation services did not appear to have as large of an impact. New substantiated allegations within 12 months remained at 10% or below across all dosage levels dosage (see figure below).

**Figure 34 — Percent of Children with a Substantiated CPS Allegation 6 and 12 months after Intake, by Dosage of Service (Cohort: Prior Unsubstantiated Allegation)**

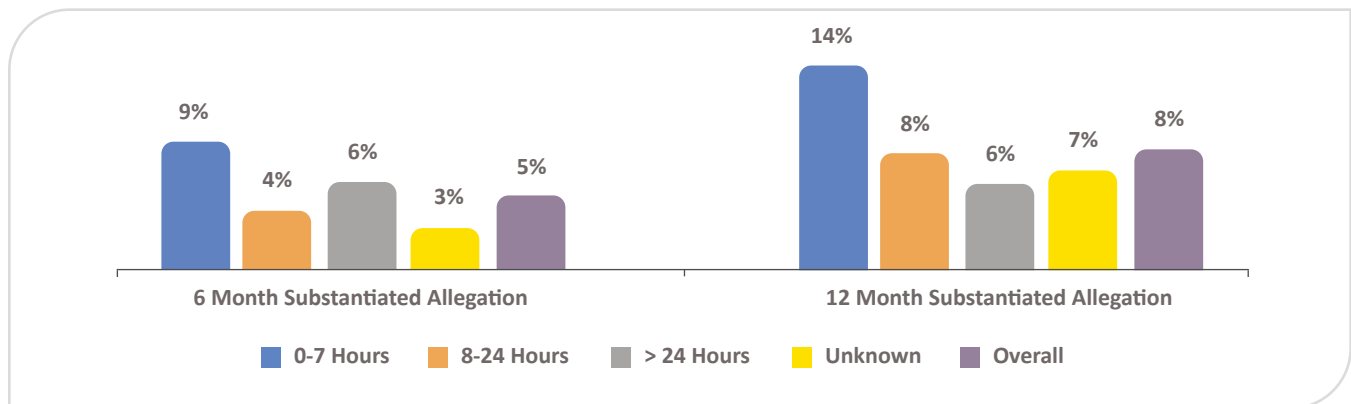


Source: Persimmony Report, Home Visiting Clients and CPS look-up. . 6 Month N=524; 12 Month N = 170.

## Clients with Any Prior CPS Involvement

There was a sizeable number of participants who had prior involvement with CPS, but for whom the disposition of that involvement was not known (i.e., if the allegation was substantiated or not). We added this group to the above groups to create a third cohort that had *any prior involvement* with CPS (whether the allegation was substantiated or not; 6 month n = 1,121; 12 month n = 406). At 12 months post-home visitation, this “any priors” cohort displayed differences between those who had 24 or more hours of home visitation (6%), compared to the other groups (14%, 8%, and 7%). This indicates the importance of participating for a longer amount of time in Birth & Beyond home visitation to encourage positive outcomes.

**Figure 35 — Percent of Children with a Substantiated CPS Allegation 6 and 12 months after Intake, by Dosage of Service (Cohort: Any Prior Involvement)**

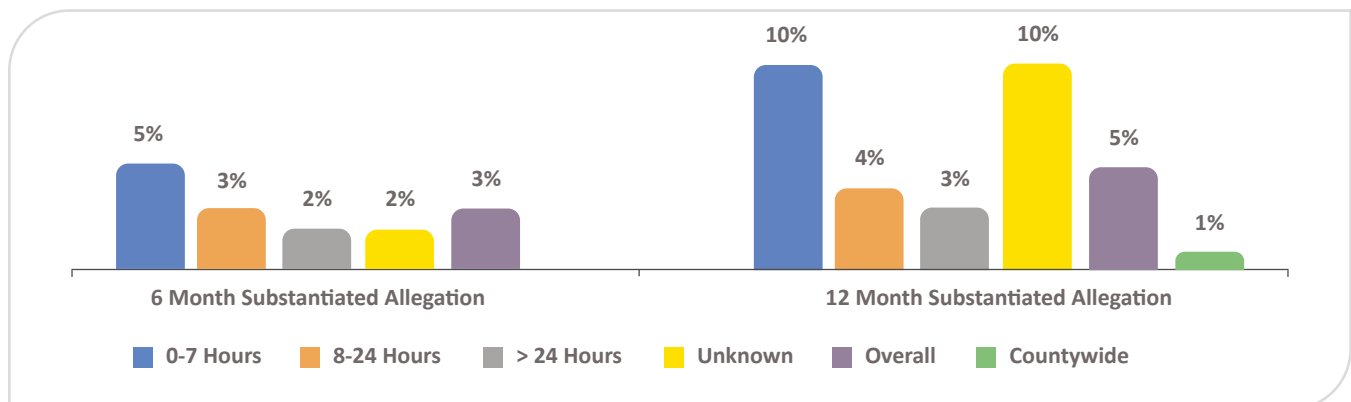


Source: Persimmony Report, Home Visiting Clients and CPS look-up. 6 Month N=1,121; 12 Month N = 406.

## All Home Visitation Clients

It is also important to consider all Birth & Beyond home visitation participants as a whole, without separating them out by prior CPS involvement. Overall, the dosage level still mattered; the group who received more than 24 hours had the lowest levels of CPS substantiated allegations post-home visitation. When looking at the overall results from all participants, 5% had a substantiated CPS allegation within 12 months of their first home visit (see figure below). Although this is more than the countywide percentage for all substantiated allegations (1%), it is important to note that half (50%) of Birth & Beyond home visitation clients had some prior involvement with CPS, and thus, the sample is much higher risk than the general population.

**Figure 36 — Percent of Children with a Substantiated CPS Allegation 6 and 12 months after Intake, by Dosage of Service (All Clients)**



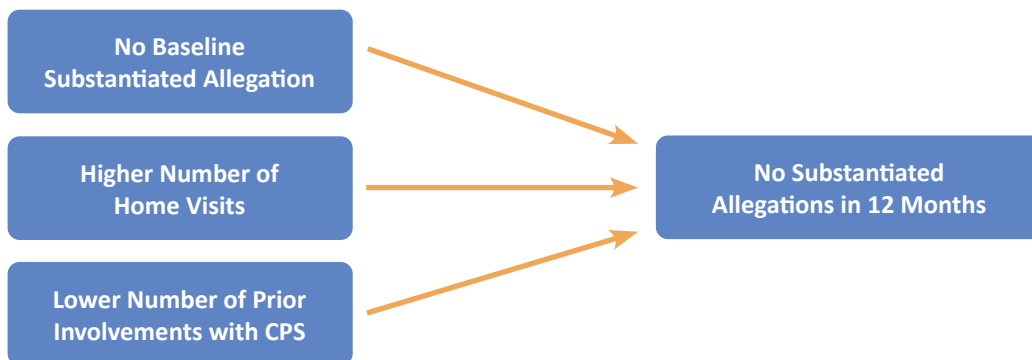
Source: Persimmony Report, Home Visiting Clients and CPS look-up. 6 Month N=2,258; 12 Month N = 868.

## Regression Analyses of CPS Outcomes

In addition to the above program and dosage outcomes, this study explored the factors that were statistically related to the likelihood of having a substantiated allegation *after* entering the home visitation program. Variables that were tested included<sup>21</sup>: Nurturing Parenting Program Tier at Intake and at Closure (Prevention, Intervention, or Treatment), CalWIN, Child Age, Minutes of Home Visiting Service, Number of Home Visits, Number of Lessons Completed, Number of CPS Prior Involvements, Having a Prior Substantiated CPS Allegation, and their Structured Decision Making Score (this tool, administered by CPS, assesses the parent's risk levels for child abuse; a higher score indicates higher risk for child abuse).

To further investigate the data, two logistic regressions were conducted to find variables that could statistically predict 12 month substantiated allegations. Regressions were used because they are able to discern if one variable is able to statistically predict the occurrence of another variable, independent of the influence of other variables. Two logistic regressions were conducted, one with all cases and one with solely the cases that were involved with CPS and had a Structured Decision Making score. The first regression, with all home visitation participants included, found that the statistically significant predictors were having no baseline substantiated allegation, having a higher number of home visits, and having a lower number of prior involvements with CPS.<sup>22</sup> Children whose families had these factors were statistically less likely to experience a substantiated allegation of abuse within 12 months of beginning home visitation services.

**Figure 37 — Relationship between Key Variables and New Substantiated Allegation | within 12 Months of Intake for ALL Participants**



Source: : Persimmony Report, Home Visiting Clients and CPS look-up. N = 420.

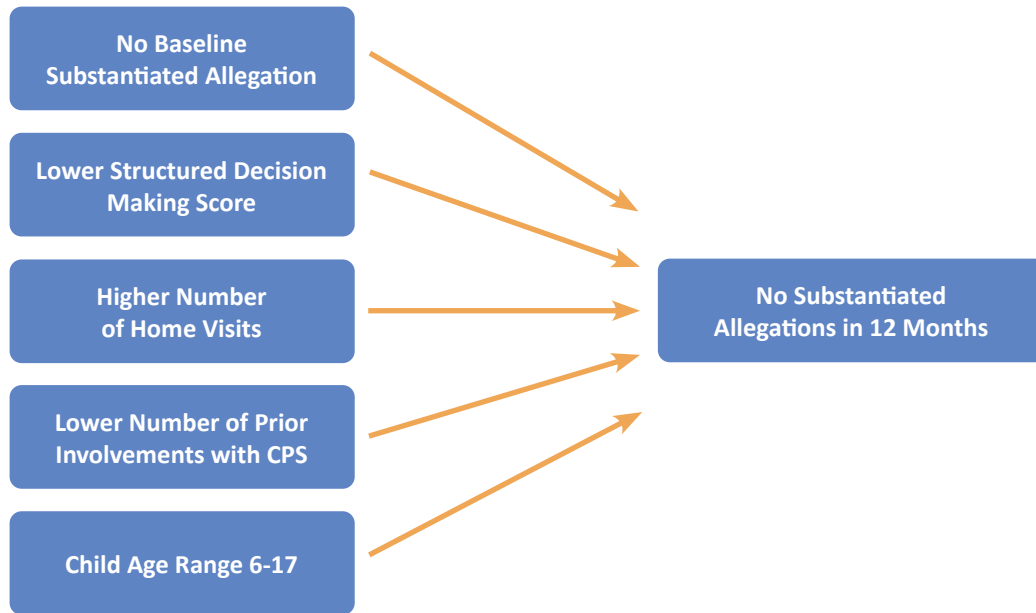
Note: All variables shown here are individual statistically significant predictors of the outcome variable.

<sup>21</sup> There were a limited amount of variables that could be included, as they had to be included in the first submission to CPS before the data were de-identified. All of the listed variables were included in the regression model.

<sup>22</sup> A further logistic regression was conducted with the population restricted to solely those children between the ages of 0-5. The same predictors emerged as with the entire population of home visitation participants.

The second regression, with only those who were previously involved with CPS, found that the statistically significant predictors were the Structured Decision Making (SDM) assessment score, baseline substantiated allegation, minutes of service, and number of home visits.

**Figure 38 — Relationship between Key Variables and New Substantiated CPS Allegation within 12 Months of Intake for CPS-Involved Participants**



Source: Persimmony Report, Home Visiting Clients and CPS look-up. N = 93. Note: All variables shown here are individual statistically significant predictors of the outcome variable.

## Success Story

Regina<sup>23</sup> and her partner were a family referred to Birth & Beyond by Child Protective Services. According to Child Protective Services, Regina declined a urine test after giving birth to her baby, due to having a drug history and having admitted to using marijuana. The Child Protective Services Worker encouraged both parents to participate in Birth & Beyond services. Regina appeared reluctant at first to starting the program, but soon began participating and opened up with the Home Visitor. However, the partner was not interested, and thus, did not participate.

Regina, a mother of three children, shared that she had lost custody of her two oldest children. She was currently raising a 7-month old daughter. Regina was immediately connected to community resources and services at Birth & Beyond. A Home Visitor referred her to meet with a housing specialist to look for safe and affordable housing, after Regina disclosed that her home was infested with cockroaches and rats. She was able to utilize the housing lists she was given and soon found a larger home for her family. Regina also utilized the Crisis Nursery information that the Home Visitor provided and used their services when it was time to move. She used both North and South Crisis Nursery locations during that time. Regina also attended a Birth & Beyond Pediatric CPR/First Aid class held at the Firehouse Family Resource Center.

Regina additionally had a visit from a School Readiness Home Visitor, and appreciated all of the information on preparing her child for school. She shared that she would be using the information on Child Action when she is ready to go back to work.



Regina expressed that she is happy in her new place because it is safer and more spacious for her family. It is also affordable, and she no longer has a roommate. Regina also graduated from the Birth & Beyond program. She completed 16 sessions of the Nurturing Parenting Program and received her certificate. She shared she learned a lot about empathy, being a nurturing parent, and ages & stages of development. The Home Visitor was able to see how Regina utilized what was discussed and how she bonded with her baby. Regina would hold, play, and give lots of love and attention to her baby during these visits. Additionally, Regina wanted to continue to do the lessons she did not complete and continue to improve her parenting knowledge. Therefore, her Home Visitor made a new referral to the Birth & Beyond that was located near her new address in North Highlands to further provide her with more local support and resources. Regina's ability to improve her family's circumstances, combined with her desire to continue learning and growing as a parent, and to stay connected with Birth & Beyond services, demonstrated her family's success.

<sup>23</sup> Names have been changed and stock photos have been used to protect the anonymity of those involved in success stories.



# Summary, Conclusions & Recommendations

Birth & Beyond continues to have a large impact on families facing at-risk circumstances who live in Sacramento County. Through a comprehensive array of services, including enhanced core services, parenting education, home visitation, and crisis intervention services, Birth & Beyond has positively influenced the lives of many adults and children for the past 20 years. The current evaluation report focuses on programmatic reach and client outcomes achieved by Birth & Beyond during FY 2018-2019.

The overall vision of Birth & Beyond is that all children are safe, healthy, and connected to a strong community. The work that has been done at the nine Family Resource Centers provides both light-touch services, like support groups and stress-relief events, as well as more intensive services, such as home visitation and crisis intervention. Many families are involved with multiple Birth & Beyond programs, and combining services can often provide the most complete care for families.

There are many benefits that are associated with Birth & Beyond programming that are unmeasurable. Many participants report increased social connections because of their involvement with Birth & Beyond, which can contribute to a host of positive outcomes, including the reduction of social isolation, increasing meaningful bonds with others, receiving advice from peers who have been in similar situations, and general supportive relationships.

In addition to providing information and guidance, Birth & Beyond also offers enhanced referrals to services that are outside of Birth & Beyond's scope. This helps to assist participants in receiving all necessary resources to improve the lives of themselves and their children.

## Recommendation #1: Explore Strategies to Better Retain Current Participants

Through both anecdotal evidence from staff at the FRCs and empirical evidence shown in the CPS outcomes matrix, participants have better outcomes when they remain in Birth & Beyond for longer periods of time. Retention can be particularly challenging when working with a high-risk population who may frequently move or have life circumstances that interfere with program attendance. Therefore, a worthwhile and necessary goal is the exploration of ways to further engage families.

## Recommendation #2: Ensure Accuracy of Data Collection and Management

As noted in various sections of this report, data for many important variables is missing for a substantial portion of participants. This limits the ability of the evaluation team to come to necessary conclusions and understanding of the data. As evidenced in the CPS outcomes section, many of the clients who were missing dosage data had very low substantiated allegations after Birth & Beyond home visitation participation. If the dosage levels were known, these clients would likely have contributed to lower percentages for that dosage level (displaying better outcomes than we are currently able to show).

## Recommendation #3: Use Findings from this Report to Guide and Sustain Programming

Birth & Beyond programming has evolved over time and expanded from solely home visiting to many other integral programs. With the addition of CalWORKs home visitation this fiscal year, many more families will receive necessary services. In order to best allocate funds, Birth & Beyond should use the current report to evaluate their programming and make important decisions about where to continue to invest its funding dollars. This report can also be used to promote the important work that Birth & Beyond is doing and can display the impact that Birth & Beyond has had within the Sacramento community.

## Recommendation #4: Work with the Department of Child, Family, and Adolescent Services to Identify Families who are the Best Fit for Birth & Beyond Programming

Birth & Beyond programming was originally intended to be a preventative measure to decrease the potential for child abuse and neglect. However, as the program has evolved, many higher-risk participants have been referred or self-referred to Birth & Beyond programs. Birth & Beyond should examine potential different programming and protocol for high-risk families if they stay in Birth & Beyond or work with DCFAS to determine if they will provide intensive services and resources for these families.



# Appendix A:

## CPS Outcomes for Birth & Beyond Home Visitation Clients

Cohort	Parameters	Baseline CPS disposition	Svc dosage (Hours)	New referral within 12 months of first HV			Countywide Comparison
				N (Total)	N (Subst)	Subst %	Subst %
CPS Involved (n= 132)	Any Baseline Referral	Substantiated (n = 62)	0-7	14	3	21%	
			8-15	2	0	0%	
			16-24	22	7	32%	
			>24	22	0	0%	
			Unknown Dosage	2	1	50%	
			Overall	62	11	18%	10%
		Not Substantiated (n =170)	0-7	39	4	10%	
			8-15	29	2	7%	
			16-24	16	0	0%	
			>24	75	6	8%	
			Unknown Dosage	11	0	0%	
			Overall	170	12	7%	6%
			Any Priors (n = 406)	Baseline CPS Referral, Disposition, or Prior CPS Involvement	N/A	0-7	77
8-15	52	2				4%	
16-24	55	7				13%	
>24	180	10				6%	
Unknown Dosage	42	3				7%	
Overall	406	33				8%	
No Prior CPS Involvement (n= 462)	No Baseline CPS Referral or Prior	N/A	0-7	54	2	4%	
			8-15	59	0	0%	
			16-24	52	0	0%	
			>24	268	1	<1%	
			Unknown Dosage	29	4	2%	
			Overall	462	7	2%	
ALL Clients (n = 868)	Referral or No Referral  Referred by Anyone	N/A	0-7	131	13	10%	
			8-15	111	2	2%	
			16-24	107	7	7%	
			>24	448	11	3%	
			Unknown Dosage	71	7	10%	
			Overall	868	40	5%	1%



# Appendix B:

## Logistic Regression Predicting Subsequent CPS Substantiated Allegations for Birth & Beyond’s Home Visitation Program among Entire Population<sup>24</sup>

	B	S.E.	df	p	OR	95% CI
<b>Baseline Substantiated Allegation</b>	<b>2.23</b>	<b>.58</b>	<b>1</b>	<b>.00</b>	<b>9.31</b>	<b>3.02 – 28.73</b>
<b>Number of Home Visits</b>	<b>-.13</b>	<b>.07</b>	<b>1</b>	<b>.06</b>	<b>.88</b>	<b>.77 – 1.01</b>
<b>Number of Prior Involvements with CPS</b>	<b>.37</b>	<b>.07</b>	<b>1</b>	<b>.00</b>	<b>1.45</b>	<b>1.26 – 1.67</b>
Child Age Range (0-5 or 6-17)	-.74	.57	1	.19	.48	.16 – 1.46
Nurturing Parenting Program Tier at Intake	-.69	.41	1	.10	.50	.23 – 1.13
Nurturing Parenting Program Tier at Closure	.00	.001	1	.75	1.00	.28 – 311.67
Number of Lessons	.01	.06	1	.80	1.01	.91 – 1.14
Child Sex	.33	.51	1	.52	1.40	.51 – 3.82
Minutes of HV Service	.00	.001	1	.75	1.00	1.00-1.002

<sup>24</sup> The Nagelkerke R<sup>2</sup> for this logistic regression is .40, meaning that these variables account for 40% in the variance of the data.

# Appendix C:

Logistic Regression Predicting Subsequent CPS Substantiated Allegations for Birth & Beyond’s Home Visitation Program among those with Prior CPS Involvement<sup>25</sup>

	B	S.E.	df	p	OR	95% CI
<b>Baseline Substantiated Allegation</b>	<b>1.68</b>	<b>.78</b>	<b>1</b>	<b>.03</b>	<b>3.78</b>	<b>1.70 - 10.20</b>
<b>Structured Decision Making Score</b>	<b>-2.06</b>	<b>.73</b>	<b>1</b>	<b>.01</b>	<b>7.85</b>	<b>1.76 - 18.32</b>
<b>Number of Home Visits</b>	<b>-.17</b>	<b>.07</b>	<b>1</b>	<b>.02</b>	<b>.93</b>	<b>.71 - .97</b>
<b>Number of Prior Involvements with CPS</b>	<b>.46</b>	<b>.17</b>	<b>1</b>	<b>.01</b>	<b>1.58</b>	<b>1.14-2.18</b>
Child Age Range (0-5 or 6-17)	-2.46	.99	1	.01	.09	.01 – .59
Nurturing Parenting Program Tier at Intake	.46	1.57	1	.99	.99	.01 – 4.97
Nurturing Parenting Program Tier at Closure	.00	.001	1	.75	1.00	.28 – 311.67
Number of Lessons	.001	.001	1	.14	1.00	.87 – 1.22
Child Sex	.07	.04	1	.18	1.03	.23 – 2.39
Minutes of HV Service	.002	.001	1	.14	1.00	1.00-1.01

<sup>25</sup> The Nagelkerke R2 for this logistic regression is .20, meaning that these variables account for 20% in the variance of the data. This rather small amount of variance suggests that there are other unknown variables that could be major contributors in this relationship. Results should be interpreted with caution.

# *Birth* **& Beyond**

Family Resource Centers

