On the Home Front:

A report on home visiting in Westchester County in support of the critical 0 to 5 years











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Introduction

The early years of a child's life are critical for physical, emotional and cognitive development. Early childhood home visiting services are a key support for families with young children from 0 to 5 years of age, providing individualized in-home guidance and support, as well as connection to needed services for families. While the details of evidence-based or evidence-informed home visiting models differ—visits may be conducted by nurses, social workers or paraprofessionals, visits may start as early as pregnancy and continue as late as kindergarten entry—all have been shown to have long-lasting positive effects on child and family wellbeing. These programs can reduce child abuse and neglect, improve family and parent functioning, improve child health and increase school readiness¹.

Despite the proven results and high cost-benefit ratio of home visiting services, only a small portion of the families who could benefit from such programs actually receive these services. In Westchester County, for example, over **95%** of low-income families (for whom childbirth expenses were covered by Medicaid) do not receive the home visiting services they need.²

Since 2009, Westchester Children's Association (WCA) has convened and chaired a Home Visiting Workgroup. Its 25-plus active members represent county departments, nonprofit social service and health providers, early childhood educators, and others. The objective of the workgroup is to expand and improve home visiting services in the county by advocating for increased funding and improving communication and collaboration among programs currently providing home visits or otherwise serving very young children and their families.

In 2011, WCA conducted a scan of existing home visiting services and their program capacity in Westchester County. During the summer of 2016, with input from the workgroup, WCA undertook a more detailed assessment of the landscape of home visiting programs in Westchester. This report shares the results of the 2016 survey and makes recommendations for further study and action. We hope it will help guide the work of community organizations, elected officials, and philanthropists as we all work collaboratively to expand and coordinate home visiting services in Westchester.

¹ Home is Where the Start Is, 2016, Schuyler Center for Analysis and Advocacy, http://scaany.org/policyareas/maternal-infant-and-early-childhood/

² Home is Where the Start Is, 2016, Schuyler Center for Analysis and Advocacy, http://scaany.org/policyareas/maternal-infant-and-early-childhood/

Methodology

There are a variety of early childhood home visiting services operating in Westchester County. Our survey included **all** programs we could identify that had a home visiting component, even if that was not the primary focus of the program. The survey was designed to understand the full continuum of programs currently available to families in Westchester County. While many of the nationally recognized, evidence-based programs such as Nurse-Family Partnership, Healthy Families America, Parents as Teachers or Parent Child Home Program, provide long-term in-depth home visits, for some families a single visit from a nurse or social worker may be the only support they need. As the Westchester Home Visiting Workgroup works toward a coordinated system of early childhood home visiting services, we felt it was important to know about the range of home visiting programs currently available to families.

WCA conducted the home visiting scan from June 2016 through July 2016 and administered it through an online survey tool. We sent the survey to twenty-eight programs; fifteen programs completed the survey in full.

The following programs that provide home visits responded to our survey:

- ANDRUS-Healthy Families New York
- April's Child-Parent Aide Program
- birth-in-motion (doula services)
- Dominican Sisters Family Health Service-MCH Program
- Family Services of Westchester-Early Childhood Respite
- Family Services of Westchester-Early Head Start
- Family Services of Westchester-Early Recognition Screening Program
- Family Services of Westchester-Family Strengthening
- Family Services of Westchester-Head Start
- Mt. Vernon Neighborhood Health Center-Maternal Infant Community Health Collaborative
- Parents as Teachers
- Visiting Nurse Service in Westchester
- Westchester Community Opportunity Program-Head Start and Early Head Start Program
- Westchester County Department of Health
- Westchester Jewish Community Services-Parent Child Home Program
- Westchester Jewish Community Services-Young People Achieve

The survey consisted of five sections of questions (these can be found in appendix A):

- 1. Program Model
- 2. Program Staff
- 3. Clients Served By Program
- 4. Program Costs
- 5. Program Services & Evaluation

Key Findings:

Our survey was distributed to the widest possible array of programs that include visits to families in their service model, even if those visits are not the primary modality of service delivery. The results confirmed some of our expectations and challenged others. It also left us wanting to ask more questions.

There is wide variation among programs providing home visiting services:

Our scan asked providers for basic information about their programs and the answers show that there is no "one-size-fits-all" approach to home visiting in our county. For example, program capacity varies from serving fewer than 25 to more than 1,800 families per year. Similarly, the number of visits annually varies from 1 or 2 to more than 50. Sixty percent of the programs responding to our survey have an income eligibility requirement for client families. Although we did not specifically ask this question, we know that families must be referred by the department of social services, family court, or other public agencies to receive services at some of the surveyed programs.

It is also interesting to note the geographic range of programs surveyed. Seven programs are countywide, while our five most urban municipalities are served by many more programs: White Plains (11 programs), and ten each for Mount Vernon, New Rochelle, Peekskill, and Yonkers.

Finally, we are unable to report clearly on the per-family cost of programs surveyed because we did not receive enough complete information on this topic.

The array of programs remains substantially unchanged since 2011:

Because the organizations surveyed and questions asked in the 2011 and 2016 surveys were not identical, it is difficult to make an exact comparison between the two sets of results. However, we did find that most of the programs reporting operations in 2011 were still in existence in 2016. One notable addition to the field is Parents as Teachers program offered through Neighbors Link and the Bedford Central School District.

Capacity of some programs has declined:

Specifically, we know that ANDRUS Community Services reported that their Healthy Families home visiting program was serving 80-120 families in 2016, down from 147 families reported in 2011. Similarly, April's Child, which was called the Child Abuse Prevention Center in 2011, is only serving half the number of families (75) that they were five years ago (150).

• Capacity has grown in other programs:

At the same time, some new programs have come to the county, such as Parents as Teachers (mentioned above) which serves 50 families per year. Additionally, West COP's Early Head Start program, which was not fully operational in 2011, now serves 1800 families a year along with its Head Start program.

• The need for home visiting services is <u>not</u> declining:

In fact, the need is increasing. Many more Westchester children could benefit from home visiting services. While the total number of births in Westchester County from 2011 to 2015 (most recent data available) has stayed flat (10,719 live births³ in 2011 and 10,699⁴ live births in 2015), the number of these births that were paid for by Medicaid ("low-income births") has increased from 3,968⁵ in 2011 to 4,169⁶ in 2015, a 5.1% increase. The Schuyler Center for Analysis and Advocacy estimated that the unmet need for evidence-based home visiting services for families who live at or below 100% of the federal poverty level in Westchester is 95.2%. Many families whose incomes are above the federal definition of poverty could also benefit from in-home supports.

Finally, of the programs we surveyed, more than half (54%) maintain a waiting list for services.

• African American children are being under-served by home visiting programs:

Home Visiting providers have long noted that the families they serve are overwhelmingly Hispanic/Latino. They report that they have difficulty engaging and enrolling African American families, and there is a concern that such families who could benefit from home visiting services are not receiving them.

https://www.health.ny.gov/statistics/vital statistics/

³ NYS Dept. of Health, Vital Statistics of New York State 2011, Table 13,

⁴ U.S.Census, 2015 Population Estimates, Estimates of the Components of Resident Population Change: April 1, 2010 to July 1, 2015, http://factfinder.census.gov

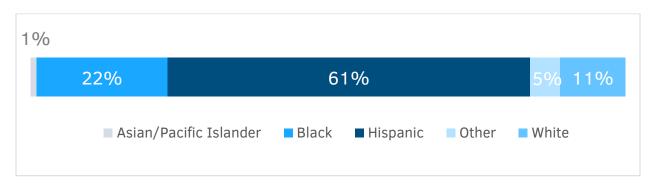
⁵ NYS Dept. of Health, Vital Statistics of New York State 2011, Table 13, https://www.health.ny.gov/statistics/vital statistics/

⁶ New York State Medicaid Claims, 2015, Salient Interactive Miner (SIM), Data extracted on 3/13/2015

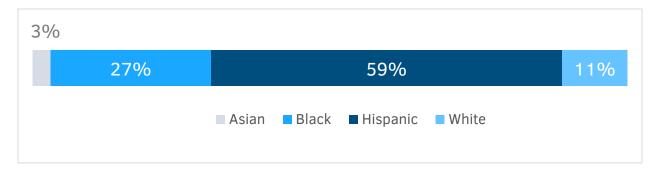
⁷ Home is Where the Start Is, 2016, Schuyler Center for Analysis and Advocacy, http://scaany.org/policyareas/maternal-infant-and-early-childhood/

Providers in our survey reported the race/ethnicity of families served, and we compared those reported percentages with the prevalence of each group in the Westchester County's population of children ages 0-5 living below the Federal Poverty Level (FPL).

Based on survey results, the ethnic/racial breakdown of families served by home visiting programs is as follows:



These percentages can be compared to the following data about children 0-5 living below FPL as a percentage of the total number of children 0-5 living below FPL in Westchester⁸.



Home visiting serves Hispanic children roughly in proportion to their representation in the target population; they make up about 61% of those served by the programs who responded to our survey and 59% of all low-income children ages 0-5 in Westchester County. Unfortunately, Black children are underserved, representing just 22% of those served by home visiting programs, but 27% of young, poor children in the county.

Recommendations and Next Steps:

Explore/identify ways to effectively engage and serve eligible African American families.
 Currently, the proportion of Black children served by home visiting programs is 18.5%
 lower than their representation in the target population of poor children 0-5 years of age.
 With our partners in the Home Visiting Workgroup, WCA will explore the barriers to

⁸ U.S. Census, 2015 American Community Survey 5-Year Estimates, Tables B17001B,D,H & I, http://factfinder2.census.gov

- engaging Black or African American families and identify successful, evidence-based practices used to support such families in other communities.
- 2. Collect further data to determine if other client groups are similarly underserved, such as teen moms, LGBT families, undocumented families, etc. This survey did not ask this question but it would be helpful to have information that is more granular. This information will inform the development of relevant programs, appropriate outreach and partnerships, and pursuit of specific funding opportunities.
- 3. Continue advocacy to increase political support and public funding for existing and emerging evidence-based and evidence-informed models. Evidence-based home visiting produces long lasting and pervasive benefits for children and their families, translating into a strong return on investment. A strong evidence base allows programs to be better equipped to do ongoing evaluation, monitoring and measuring impact on children and families.
- 4. Build public support for home visiting. This will require and deserves long-term committed effort by WCA and other advocates. One potential avenue to build public support for these investments is to make home visiting a *universal* service, such as it is in many European countries. In countries where home visits are available for all families, extra support is valued and appreciated when a new child enters the family, and public investments in these services are widely supported. WCA will advocate for the creation of a pilot universal home visiting program in one Westchester community in order to demonstrate the efficacy of this approach.
- **5.** Promote collaboration and coordination between traditional home visiting and other programs serving families with children 0 to 5. Virtually all survey respondents indicated that they collaborate with or refer clients to a variety of other services including school districts, health clinics, other child-serving programs, and county departments. We believe that there is an opportunity to strengthen services to young families by better linking home visiting programs to other emerging approaches.

Despite the shortage of evidence-based home visiting resources, there are bright spots for very young children on the Westchester landscape. Since 2011, a number of independent programs and new services have developed and are targeting low-income and vulnerable families with young children. They include modest expansion of evidence-based home visiting (Healthy Families and Nurse Family Partnership in Yonkers), group early literacy programs (Five by Five), parent outreach based in health settings (Baby Box Project at Open Door), and also the recent adoption of the Boston Basics model by several school districts (Ossining, Peekskill, and Yonkers.) The challenge and opportunity is how to

maximize existing resources and develop innovative, coordinating programming that reaches as many children and families as possible. With our partners, WCA is currently seeking funding and opportunities to convene all 0-5 service providers by community and facilitate local coordination and planning.

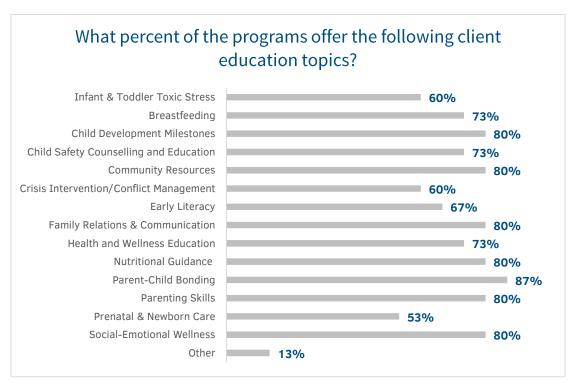
Conclusion:

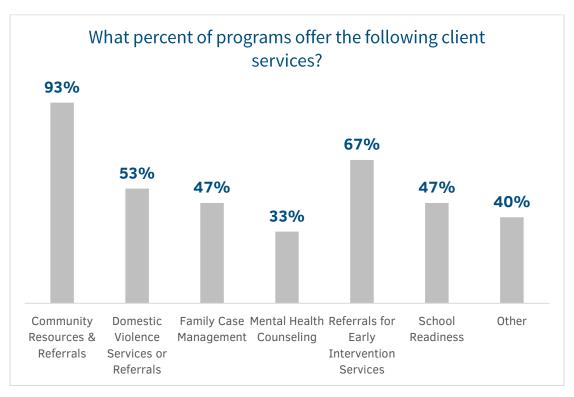
Early childhood home visiting services, especially those provided through evidence-based models, are powerful, long-lasting interventions that improve outcomes for vulnerable children and families. Although home visiting programs in Westchester exist and are having positive impacts, they have severely limited capacity due to lack of funding. Moreover, despite vigorous advocacy at the federal, state and local levels, the prospect for increased government investments in this proven method is currently dim.

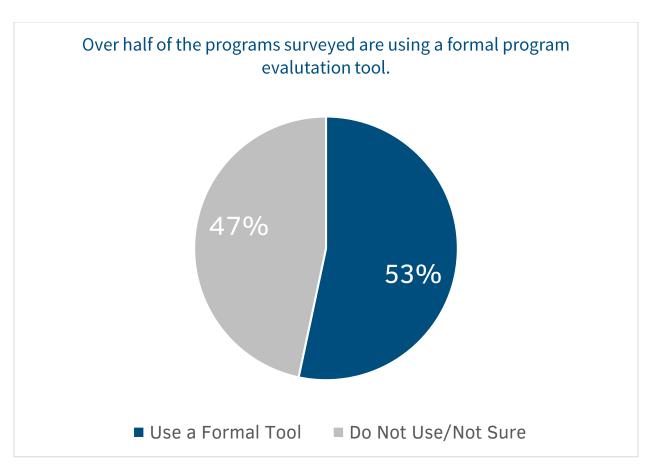
Young children *cannot wait* to get the supports they need. We must find ways to focus and leverage current resources to promote healthy development for more children and their parents. WCA remains committed to ensuring that all children have the best start possible within families that have their physical, social, emotional and developmental needs met, as well as to working with all possible public, private and nonprofit partners toward this goal.

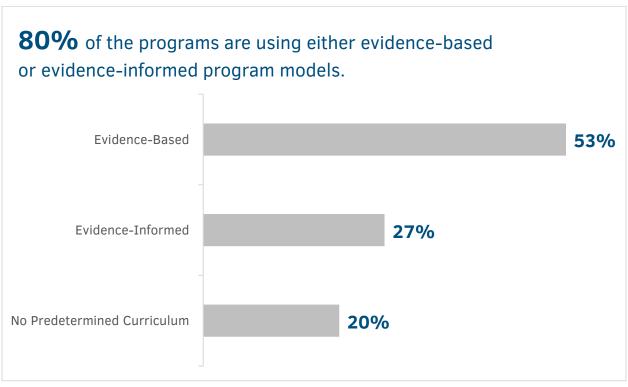
Highlights of 2016 Home Visiting Survey Results

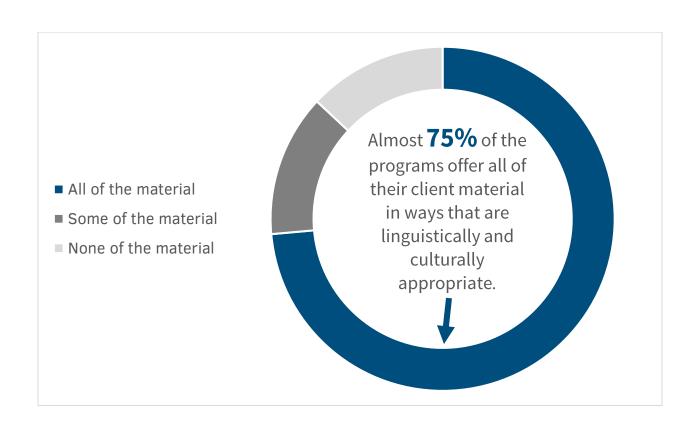
Program Characteristics

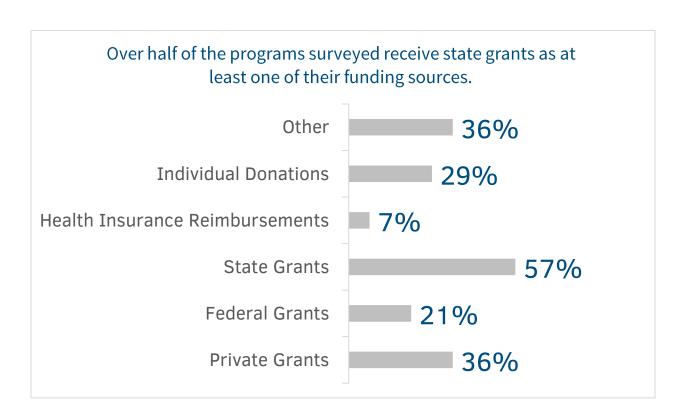




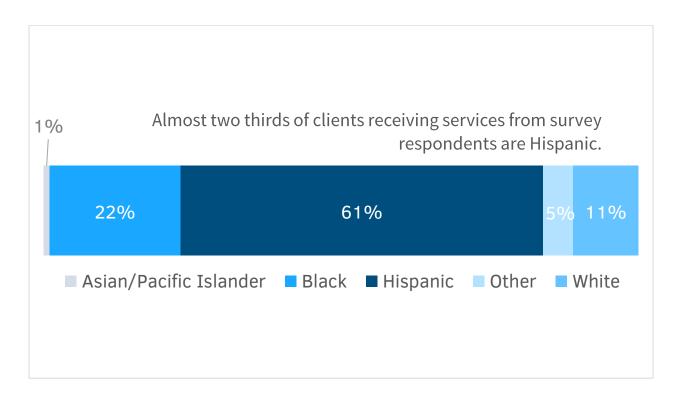


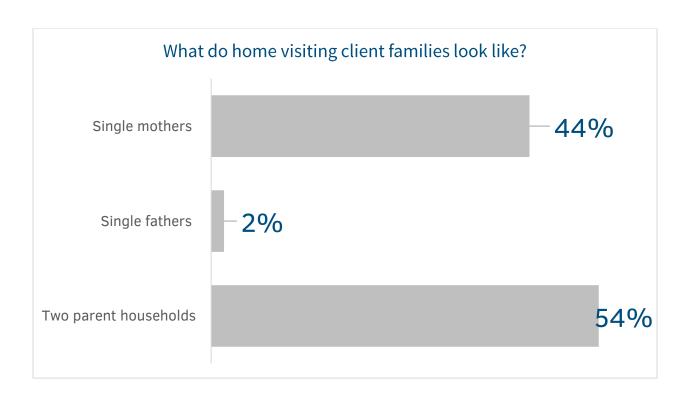


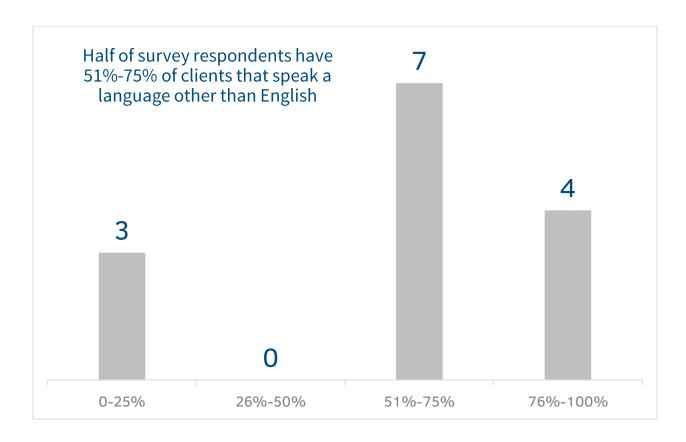




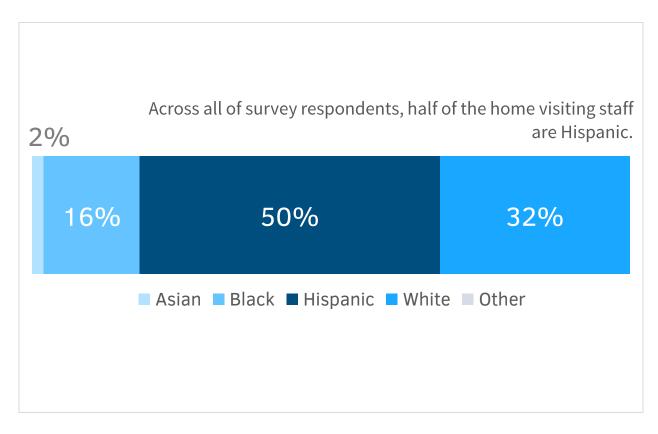
Client Characteristics

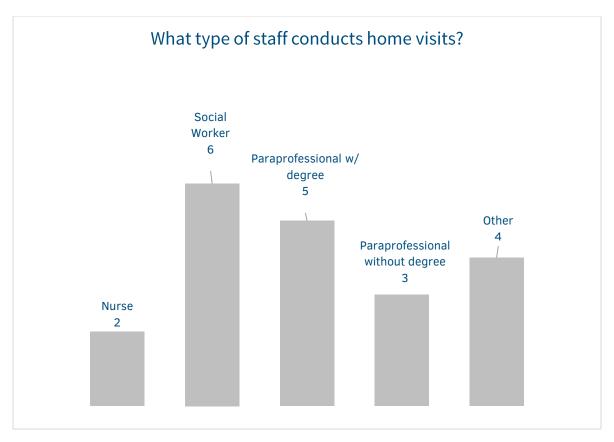


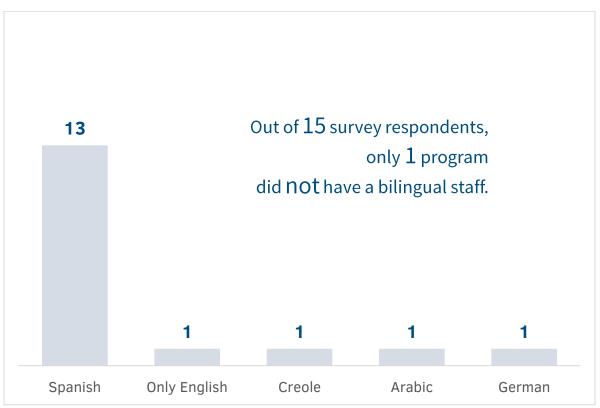




Staff Characteristics







Westchester County Maternal, Infant, Child, and Family Home Visiting Programs

Supports such as maternal, infant, child and family home visiting programs for families with children under the age of 6 can help strengthen families by enhancing the well-being and development of young children. As Westchester Children's Association's Home Visiting Workgroup strives to advance family-oriented solutions in Westchester County, we need information to compare available sources with the needs of our community.

In order to plan and advocate appropriately for expanded and targeted programs throughout Westchester County, we request that you fill out this survey to the best of your ability. If home visiting is one component of a larger array of services in your program, please answer these questions as they pertain to the home visiting portion of your services. Similarly, please limit responses to this survey to programs that work with infants, children and families under the age of 6. It should only take about 10-15 minutes of your time. If you have questions or need help completing the survey, please contact Sarah Halperin at intern@wca4kids.org or 914-946-7676 ext.309. We greatly appreciate your cooperation and look forward to hearing from you.

1. Organization/Age	ency
2. Name of Home V	/isiting Program
3. Contact Person	
Name	
Title	
Email Address	
Phone Number	

Program Model Information		
4. Which of the following describe	s your program model? (See definiti	ions below)
Evidence-based program		
Evidence-informed program		
Working towards evidence-informed	program	
Do not follow a predetermined curric	eulum	
quality studies showing one or more favor Home Instruction for Parents of Preschoo Analysis and Advocacy, New York State F Programs-Chart-Final-Draft.pdf, e-mail co Evidence-Informed programs use the b while incorporating lessons from existing and Advocacy, New York State Home Visi Final-Draft.pdf, e-mail communication 4/7.	rable outcome in the same domain. (For example outcome in the same domain.) (For example outcome visiting Workgroup, http://www.wca4king.) (For example: Parent-Child Home iting Workgroup, http://www.wca4kids.org/wg/16.)	m design and delivery, allowing for innovation Program) Source: Schuyler Center for Analysis o-content/uploads/2016/06/HV-Programs-Chart-
10507 (Bedford Hills)	10802 (New Rochelle)	10603 (White Plains)
10506 (Bedford Village)	10804 (New Rochelle)	10604 (White Plains)
10709 (Eastchester)	10805 (New Rochelle)	10607 (White Plains)
10523 (Elmsford)	10562 (Ossining)	10701 (Yonkers)
10552 (Fleetwood/Mount Vernon)	10566 (Peekskill)	10703 (Yonkers)
10543 (Mamaroneck)	10573 (Port Chester/Rye Brook)	10704 (Yonkers)
10549 (Mount Kisco)	10591 (Sleepy Hollow/Tarrytown)	10705 (Yonkers)
10550 (Mount Vernon)	10605 (White Plains)	10710 (Yonkers)
10553 (Mount Vernon)	10606 (White Plains)	Countywide
10801 (New Rochelle)	10601 (White Plains)	
Other (please separate zip codes with a c	comma):	

6. How many families does your program serve a year?	
7. How many home visits does your program offer a family in a year?	
8. When do home visits begin (prenatally, 1st month post-partum, age 3, etc.)?	
9. Does your program have a cut off age after which you terminate a client family?	
Yes	
○ No	
If yes, please specify the age.	
If yes, please speeily the age.	
10. Does your program have a maximum number of home visits for each client family?	
Yes	
○ No	
If yes, please specify the maximum number of home visits per family.	
17	

11. Who provides the home visits?	?	
Nurse		
Social Worker		
Paraprofessional with undergraduate	e degree	
Paraprofessional with no undergradu	uate degree	
Other, please specify:		
12. Do you have a bilingual staff?		
Yes		
No No		
il yes, piease list each language spoken a	and the percent of staff who speak it separated b	y a comma.
	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%.	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%. White	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%. White Hispanic or Latino	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%. White Hispanic or Latino Black or African American Native American or	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%. White Hispanic or Latino Black or African American Native American or American Indian	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%. White Hispanic or Latino Black or African American Native American or American Indian Asian / Pacific Islander	fall in to each of the following ethnic gro	oups?Note: Sum of categories
must add up to 100%. White Hispanic or Latino Black or African American Native American or American Indian Asian / Pacific Islander Other 14. To what extent does your prog	fall in to each of the following ethnic gro	
must add up to 100%. White Hispanic or Latino Black or African American Native American or American Indian Asian / Pacific Islander Other		

15. Does your program have an income eligibility requirement? Yes No If yes, please specify income eligibility requirements (i.e. under 150% Federal Poverty Level) 16. Do you have a wait list? Yes No If yes, how many people are on the wait list? 17. What percentage of your client families fall in to each of the following ethnic groups? Note: Sum of categories must add up to 100%. White Hispanic or Latino Black or African American or American Indian Asian / Pacific Islander Other 18. What percentage of your client families represent the following households? Note: Sum of categories must add up to 100%. Two parent households Single fathers Single mothers	Clients Served By Program
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If yes, how many people are on the wait list? 17. What percentage of your client families fall in to each of the following ethnic groups? Note: Sum of categories must add up to 100%. White Hispanic or Latino Black or African American Native American or American Indian Asian / Pacific Islander Other 18. What percentage of your client families represent the following households? Note: Sum of categories must add up to 100%. Two parent households Single fathers	Yes
17. What percentage of your client families fall in to each of the following ethnic groups? Note: Sum of categories must add up to 100%. White Hispanic or Latino Black or African American Native American or American Indian Asian / Pacific Islander Other 18. What percentage of your client families represent the following households? Note: Sum of categories must add up to 100%. Two parent households Single fathers	○ No
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18. What percentage of your client families represent the following households? Note: Sum of categories must add up to 100%. Two parent households Single fathers	
18. What percentage of your client families represent the following households? <i>Note: Sum of categories must add up to 100%.</i> Two parent households Single fathers	Asian / Pacific Islander
must add up to 100%. Two parent households Single fathers	Other
Single fathers	
	Two parent households
Single mothers	Single fathers
	Single mothers

19. What percentage of your client families speak a language?	ge other than English as their primary
0% - 25%	
26% - 50%	
51% - 75%	
76% - 100%	
Unknown	
	6
20	0

Westeriester County Home Visiting Frograms
Program Costs
20. What is the cost of your program per client family?
21. Does the above cost of your program per client family include all administrative and overhead costs (i.e office space, training, etc.)?
Yes
○ No
Other (please specify)
22. For your current program year, from which of the following sources does your program receive funding? Check all that apply. Private Grants Federal Grants State Grants Health insurance reimbursements Individual donations Other If other please specify

23. For your current program year, approximately what	
percentage of your funding comes from each of the	
following sources? If percentages are unknown,	
please skip this question.	
Private Grants	
Federal Grants	
rederal Grants	1
State Grants	
Health insurance reimbursements	1
Individual donations	
Other	
Other	1
22)

Program Evaluation & Services	
24. Do you use a formal program evaluation tool?	
Yes	
○ No	
O Not sure	
If yes, please specify	
25. What supports or education topics does your pro	ogram provide to clients or families? Check all that
apply.	ogram provide to chemic or families: Officer all that
Brain Development in Infants & Toddlers (toxic stress)	Family Relations & Communication
Breastfeeding	Health and Wellness Education
Child Development Milestones	Nutritional Guidance
Child Safety Counselling and Education	Parent-Child Bonding
Community Resources	Parenting Skills
Crisis Intervention/Conflict Management	Prenatal & Newborn Care
Early Literacy	Social-emotional Wellness
Other (please specify separate topics by a comma)	
00 14/1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	" O O I I II II I I I
26. Which of the following specific services does yo	
Community Resources & Referrals	Mental Health Counseling
Domestic Violence Services or Referrals	Referrals for Early Intervention Services School Readiness
Family Case Management Other (please specify separate services by a comma)	Scriou Readiness
Other (please specify separate services by a confina)	

client families? If so, please list agencies separated by a comma.				

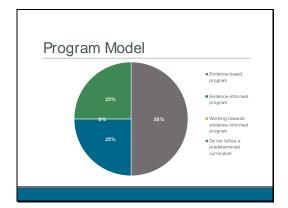
2016 Westchester Home Visiting Programs Draft Scan Results

November 1, 2016 DRAFT HIGHLIGHTS

Summary of Scan

- Conducted Summer 2016
- 17 programs responded: 15 completed the survey
- 28 agencies contacted. The following 5 agencies responded not currently doing early childhood home visits:
 Open Door
 Ossining School District
- Westchester County DCMH
- Westchester County DSS
 Montefiore/ Healthy Steps

Program Model Information



What zip codes does your program serve?

- All 28 zip codes included on survey have at least 1 home visiting program
- 7 programs are countywide: April's Child Birth-in-motion (doula)
- . Dominican Sisters Family Health Service
- Family Services of Westchester-Family Strengthening
 Family Services of Westchester-Early Childhood Respite
- . Visiting Nurse Services in Westchester Westchester County Department of Health
- Mount Vernon (10550), New Rochelle (10801), Peekskill, Yonkers (10705) all have 10 programs

How many families does your program serve a year?

- Less than 25 families: 3 programs
 Family Services of Westchester, Early Childhood Respite

 - •Family Services of Westchester, Early Head Start
 •Family Services of Westchester, Family Strengthening
- 50-125 families: 8 programs •Andrus, Healthy Families-NY

 - •April's Child
 - Birth-in-motion
 - •Mt. Vernon Neighborhood Health Center, MICHC •Parents as Teachers

 - *Westchester County Department of Health
 - •Westchester Jewish Community Services, Parent Child Home Program
 - •Westchester Jewish Community Services, Young People Achieve

How many families does your program serve a year?

- 200 families: 1 program
 - •Family Services of Westchester, Head Start
- 1,000 families: 2 programs
 - *Dominican Sisters Family Health Service
 *Family Services of Westchester, Early Recognition Screening Program

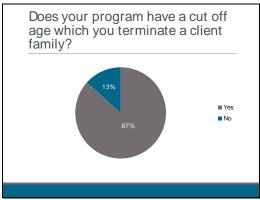
- 1,800 families: 1 program
 •WestCop, Head Start & Early Head Start Program

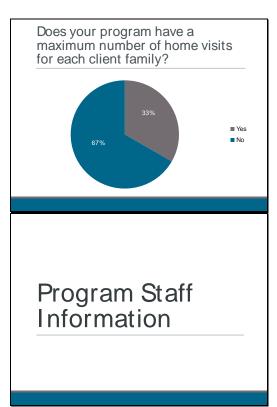
How many home visits does your program offer a family in a year?

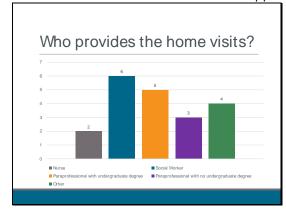
Name	Response
Westchester County Department of Health	1
Parents as Teachers	12-36
Family Services of Westchester, Head Start	2
WestCop, Head Start, Early Head Start	2-3
Family Services of Westchester, Early Head Start	32
Birth-in-motion	4
April's Child	50
WJCS, Young People Achieve	5-8, depends on need
WJCS, Parent Child Home Program	Minimum 40
Family Services of Westchester, Early Childhood Respite	1/week
Family Services of Westchester, Family Strengthening	2/ week
Mt. Vernon Neighborhood Health Center	Monthly visits
ANDRUS	Up to 52 visits a year for new families
Dominican Sisters Family Health Service	Varies
Family Services of Westchester, Early Recognition Screening Program	Varies, no set requirement

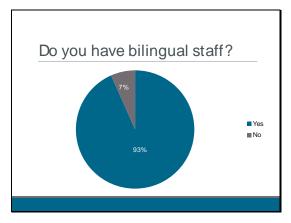
Appendix B



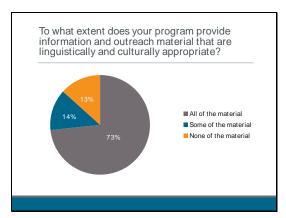




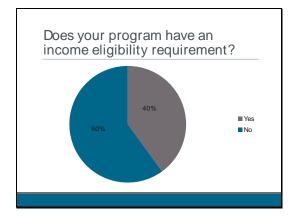


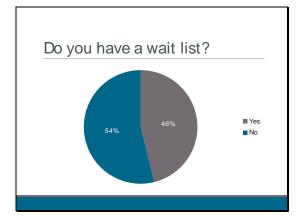






Clients Served by Program





Size of wait lists Program Wait List Size Family Services of Westchester, Early Childhood Respite April's Child 6 Parents as Teachers 20 Family Services of Westchester, Head Start Family Services of Westchester, Early 80 WUCS, Parent Child Home 140

Birth-in-motion

Sometimes, depends on when births occur

What percentage of your client families fall in to each of the following ethnic groups?

• Average for all programs:

• White: 16%

• Hispanic or Latino: 63%

• Black or African American: 23%

• Native American or American Indian: 1%

• Asian/ Pacific Islander: 1%

• Other: 3%

• 1 program did not respond

What percentage of your client families represent the following households?

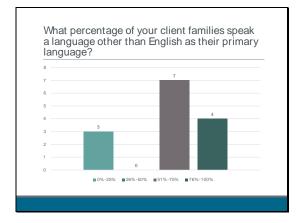
• Average for all programs:

• Two parent households: 50%

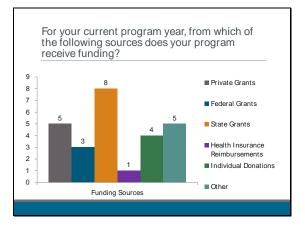
• Single fathers: 3%

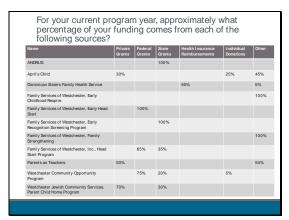
• Single mothers: 42%

• 3 programs skipped this question

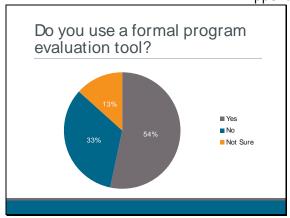


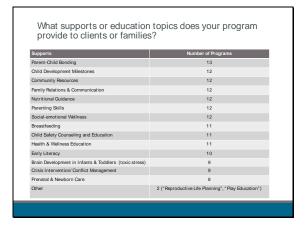
Program Costs





Program Evaluation & Services





Which of the following specific services does your program offer?

Community Resources & Referrals	14
Referrals for Early Intervention Services	10
Domestic Violence Services or Referrals	8
Family Case Management	7
School Readiness	7
Mental Health Counseling	5
Other	6

Does your program collaborate or partner with other agencies to provide additional services to your client families?

- Over 65 separate collaborations/ partnerships/ referrals listed
- Most repeated:
 School districts: 17
- School districts: 17
 Health clinics: 8
- Department of Social Services: 6
- Hospitals: 6
- Mental health clinics/facilities: 5
- FSW: 4
- WJCS: 4WIC: 4
- Child Care Council of Westchester: 3
- Pediatricians/ doctors: 3
- Planned Parenthood

Westchester County Home Visiting Programs
Spring 2011
Ages 0-6

Dominican Sisters		DOH Department of Health of Westchester County	Dominican Sisters	Andrus	SOFM	Agency
Home Visiting	Healthy Mom Healthy Baby	Healthy Beginnings	Nurse Family Partnership*	Healthy Families*	Parent Child Home Program*	Program Model
	At-risk Medicaid—eligible prenatal and postpartum women and their infants.	High-risk prenatal women who have open cases with WCDSS Preventive Services, Foster Care or CPS.		At-risk families identified by Family Stress Checklist and Kempe Assessment, pregnant and post partum women	At-risk parents (single, low-income, teen parent, multiple risk factor families, etc)	Target Population
		53			130	# of Children Served
		32		147 families	Parents and other household members	# of Other Clients (If not child)
		NB - 18		Enrollment before child reached 3 months of age and continues up to age 5	16 mo. Through age 4, typically ages 2 and 3 targeted	Age of Children Served
		Minimum of a monthly home visits by trained paraprofessionals until the newborn is one year of age.		Weekly home visits by trained paraprofessionals during at least the first six months of the child's life with intensity decreasing based on family need	Home visits twice weekly for half an hour each visit for two years following school calendar	Service
		\$2400- \$4500 dependi ng on caseloa d	\$4500	\$4,600	\$2400	Cost/ Family/ Yr
	NYSDOH	WCDSS COPS funding		OCFS and SAMSHA via Project LAUNCH	Varied: Invest in Kids, private/found ations/endo wment	Funding
	Albany, Erie, Monroe, Onondaga, Westchester and the Bornx	Westchester County		Yonkers 10701 & 10705	White Plains, Greenburgh, Port Chester, New Rochelle, Mount Vernon,Mamk	Location /Community
	Improve birth outcomes for Medicaid—eligible pregnant and postpartum women and their newborn through: early identification, outreach, referral and home visiting services.	-Prevent youth from foster care placement -Prevent low birth weight -Prevent preterm birth -Increase prenatal appointment compliance		-Support positive parent-child bonding and relationships -Promote optimal child health and development -Enhance parental self-sufficiency -Prevent child abuse and neglect	-Early Literacy -Increased School readiness -Inhanced social-emotional development -Strengthen parent-child relationship	Outcome/Goals

WIHD	NOS	Open Door	VISW Visiting Nurse Services in Westchester	Mt. Vernon Neighbor Health Center	Andrus	Agency
Project Impact	?	NA	Certified Home Health Care Services	Community Health Worker Program	TAPAS	Program Model
Parents with cognitive disabilities involved with DSS Preventive Services			Home Health Care for all ages including services for At-Risk Families, home safety evals., skilled assessment and patient education, hands on care i.e. wound care, administration of injectable medications, catheter care. Referrals received from Physicians, Hospitals, Rehab centers, CPS, MCAID managed Care.	At risk pregnant women who are not receiving prenatal care.	Referrals from Department of Social Services CPS or PS unit	Target Population
~40 per year			500 children	It varies depending on the family size—each CHW carries a caseload of 25-35 clients		# of Children Served
~18 families per year			>5000	25-35 cases per CHW	66 families	# of Other Clients (If not child)
Mostly birth through early childhood/ preschool age targeted but could include older children			From birth	Birth to 5 years old	0 to 18 years of age	Age of Children Served
3 times per week for 1.5 hours per day for 4-6 months			Intermittent Skilled Nursing, Rehabilitation Services(PT, OT, ST) Home Health Aides Medical Social Services. Visit frequency and duration dependent on need. Specialty Programs: Chronic Disease Management, Telehealth, Mental Health,	Monthly home visits	2 times per week for 3 months	Service
			Based on need	Low income families	\$3309	Cost/ Family/ Yr
DSSPS			MCARE, MCAID, Managed Care, Private Insurance, Grants.	NY State DOH	SSG	Funding
All of Westchester			All of Westchester	Mt. Vernon Yonkers Greenburgh	All of Southern Westchester County	Location /Community
Increasing parenting skills Reduce # of indicated CPS reports Reduce foster care entry/ re- entry			Improve Health status through service provision, education and sustain independence in the home.	- Positive Health Outcomes	- Reduce risk of harm to the children , improve family functioning, and avert the need for foster care placement.	Outcome/Goals

Spring 2011

Those Program Models that are not Bolded have not yet begun. Those Program Models that have * are evidence based models.

Agency	Program Model	Target Population	# of Children Served	# of Other Clients (If not child)	Age of Children Served	Service	Cost/ Family/ Yr	Funding	Location /Community	Outcome/Goals
WestCop	Early Head Start	Referrals from hospitals and physicians?			6 weeks to 2 years and 9 months	2 visits per year			Mt. Vernon, Yonkers, Peeskill, Port Chester (center based)	
FSW	Early Childhood Respite	Families with children birth to five receiving preventive services	90-100 children	24 families per year	Birth to 5	One home visit per week for 1 1/2 hour for 4-5 months		DSS	All of Westchester	-reduce the amount of children in foster care -improve patient/ child relationship -Assist with parenting
	Family Strengthening	Children ages 3-8 referred by MCT or WMC crisis Oriented Program	18 children per year	18-20 families per year	3-8 years old	Home visits sand school visits 1-2 times a week for 6-8 months		DCMH/ DSS	All of Westchester	Main goal is to keep young children out of psychiatric hospitals
Child Abuse Prevention Center (Child Abuse and Exchange)				150 families	12 (18 for DSS)	Visits 3-15 hours per week for an average of 18 months				



NYS Home Visiting Need

WESTCHESTER COUNTY

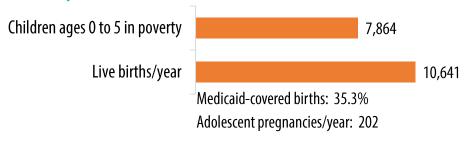
Data Snapshot

June 2016



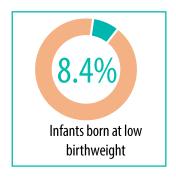
Indicators of Need

Poverty



14.3% children 0 to 5 live in poverty

Health and Well-Being

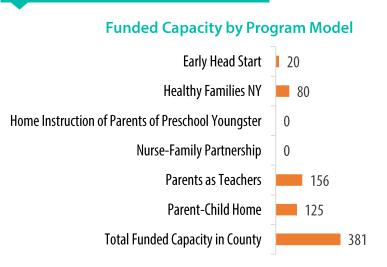




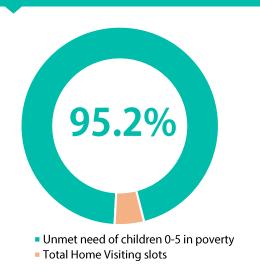
1,606
Children in indicated reports to Child Protective Services

Newborns with a drugrelated diagnosis

Access to Home Visiting



Unmet Need



^{*}Data was pulled from various sources, most—but not all—from 2014 data. To see our full report, which includes snapshots of New York State and all New York counties, and for information on the data sources, please go to www.scaany.org/policy-areas/maternal-infant-and-early-childhood.

ORGANIZATION/AGENCY NAME	HOME VISITING PROGRAM	CONTACT PERSON	EMAIL
Andrus	Healthy Families New York	Corine E. Lurry	clurry@jdam.org
April's Child	Parent Aide Program	Sonia Herzenberg- Kleinman, LCSW	soniahkleinman@hotmail.com
Birth-In-Motion	Birth-in-Motion	Silvie Falschlunger	scfalschlunger@optonline.net
Dominican Sisters Family Health Service	Dominican Sisters Family Health Service-MCH Program	Terry Georgeo	tgeorgeo@dsfhs.org
Family Services Of Westchester, Inc.	Head Start	Vernex Harding	VHarding@fsw.org
Family Services Of Westchester, Inc.	Early Head Start	Vernex Harding	vharding@fsw.org
Family Services Of Westchester, Inc.	Family Strengthening	Diana Cohen, LCSW	dcohen@fsw.org
Family Services Of Westchester, Inc.	Early Childhood Respite	Diana Cohen, LCSW	dcohen@fsw.org
Family Services Of Westchester, Inc.	Early Recognition Screening Program	Sebastian Bliffel	SBliffel@fsw.org
Mt. Vernon Neighborhood Health Center	Maternal Infant Community Health Collaborative - Community Health Worker Services	Cheryl Hunter-Grant	hunter-grantc@lhvpn.net
Parents As Teachers	Parents as Teachers	Danielle Levin	dlevin 0633@bcsdny.org
Visiting Nurse Service In Westchester	Certified Home Health Care Provider	Mary Gadomski	mgadomski@vns.org
Westchester Jewish Community Services	Parent Child Home Program	Patrice Cuddy	pcuddy@wjcs.com
Westchester County Department Of Health	Westchester County Department of Health	Laurie R. Smalley, SPHN	lds2@westchestergov.com
Westchester Community Opportunity Program, Inc.	Head Start, Early Head Start Program	Ellen Farrar	efarrar@comcast.net
Westchester Jewish Community Services	Young People Achieve	Paula Santa-Donato	psantadonato@wjcs.com







WCA would like to thank all members of the Home Visiting Workgroup for their continuous work, ongoing support and dedicated advocacy to improving home visiting services in Westchester. A special thanks to members (identified below by *) who completed the survey, shared their time, information and insights.

Westchester Children's Association Home Visiting Workgroup Agencies, as of May 2017

ANDRUS *

April's Child *

Archcare (formerly Dominican Sisters) *

Bedford Central School District

Birth in Motion *

Child Care Council of Westchester

Family Services of Westchester *

5 Steps to Five

Frog Rock Foundation

Hudson River Health Care

Lower Hudson Valley Perinatal Network

Montefiore Home Care

Mt. Kisco Child Care Center

Mt. Vernon Neighborhood Health Center *

Neighbors Link

Open Door Family Medical Center

Ossining Union Free School District

Parents as Teachers *

Student Advocacy

Visiting Nurse Service Westchester *

Westchester Community Opportunity

Program*

Westchester County Department of Social Services

Westchester County Department of Community Mental Health

Westchester County Department of Health *

Westchester County Medical Center

Westchester Institute for Human Development

Westchester Jewish Community Services *

WCA gratefully acknowledges the Raffiani Family Foundation for support of this report and the Frog Rock Foundation and the Philip and Lynn Straus Foundation for support of our work on early childhood issues.

Westchester Children's Association works to ensure that every child is healthy, safe and prepared for life's challenges.

We Educate!

We analyze data, publish information and hold events to educate the public and policy makers about children's needs.

We Connect!

We convene and lead conversations to build a shared agenda addressing those needs.

We Act!

We advocate and mobilize parents, youth, and concerned citizens to support effective solutions that improve kids' lives.

Please join us in our mission.



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