

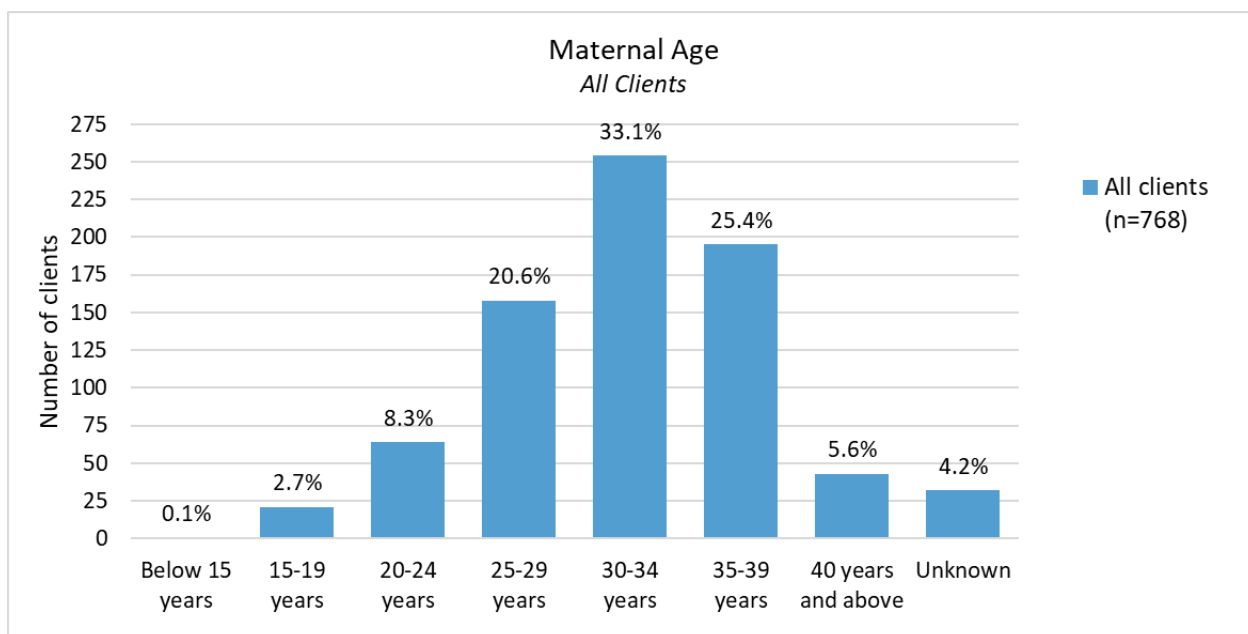
# Family Connects in Travis County 2019

## Demographics for All Clients and New Referrals

This summary is based on data collected from 768 families who were served by the in-home visiting program Family Connects in Travis County during 2019. During this time, 432 unique families (56% of all clients) received at least one new referral intended to connect them to a community resource or service.

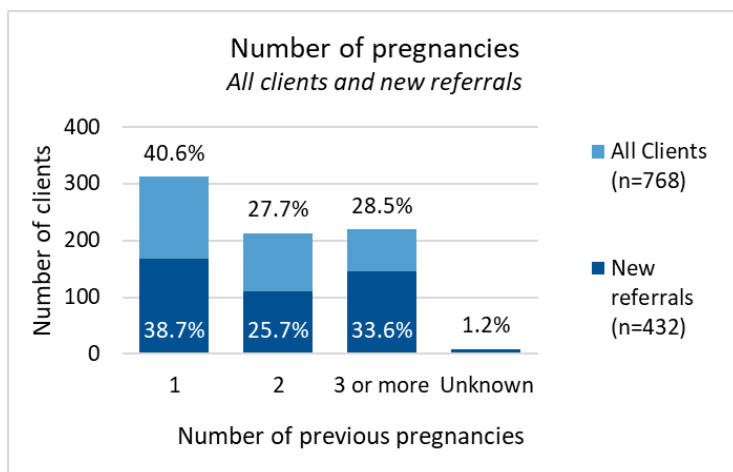
### Maternal age

Caregivers ranged in age from 12-50 years. Nearly one-third of all caregivers served were between 30-34 years of age. On either side of this demographic, 21% of clients were between 25-29 years old and 25% of clients were between 35-39 years old. The next most common age range was 20-24 years old (8% of all clients). For each age category, the percentage of clients who received new referrals was similar to their overall representation among all clients.



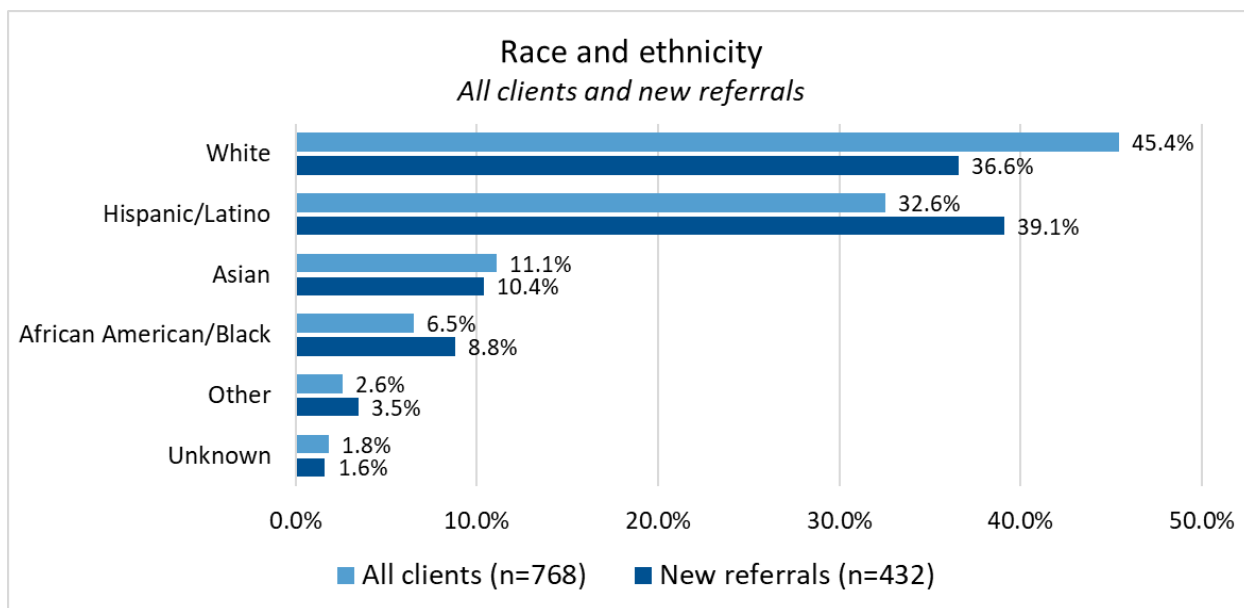
### First-time mothers

Out of all clients served by Family Connects, 40.6% reported that they had only one previous pregnancy. A similar percentage (38.7%) of clients who received new referrals reported only one previous pregnancy. These percentages likely underrepresent the number of first-time mothers served. For example, 51% of all clients and 49% of new referrals reported that they had only one living child.



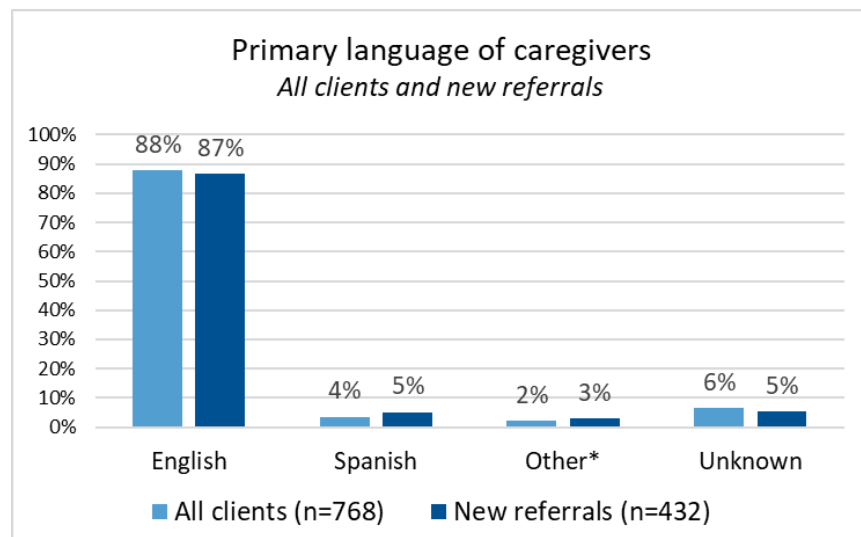
## Race and ethnicity

During in-home visits, Nurses asked clients to identify their race/ethnicity. In this reporting of racial and ethnic demographics, the category “Other” includes individuals who identified with the following categories: Some other race, Two or more races, Native Hawaiian or Other Pacific Islander, and American Indian or Alaska Native. The category “Unknown” counts those caregivers who did not provide information about race and ethnicity.

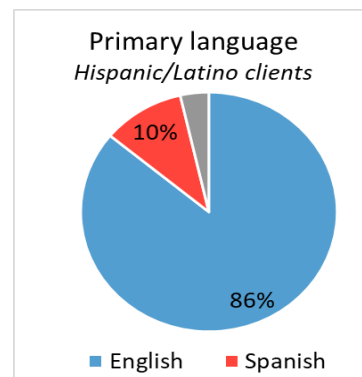


## Primary Language

English was the primary language spoken by a majority (88%) of all 768 caregivers served and 87% of clients who received new referrals. Spanish was the primary language spoken by 5% of all caregivers and 4% of those with new referrals. Other primary languages included Hindi, Vietnamese, ASL, Amharic, Farsi, Arabic, Portuguese, Chinese, Russian, and French, each represented by one or two clients.



Among the 250 clients who identified as Hispanic or Latino, 10.4% spoke Spanish as their primary language.



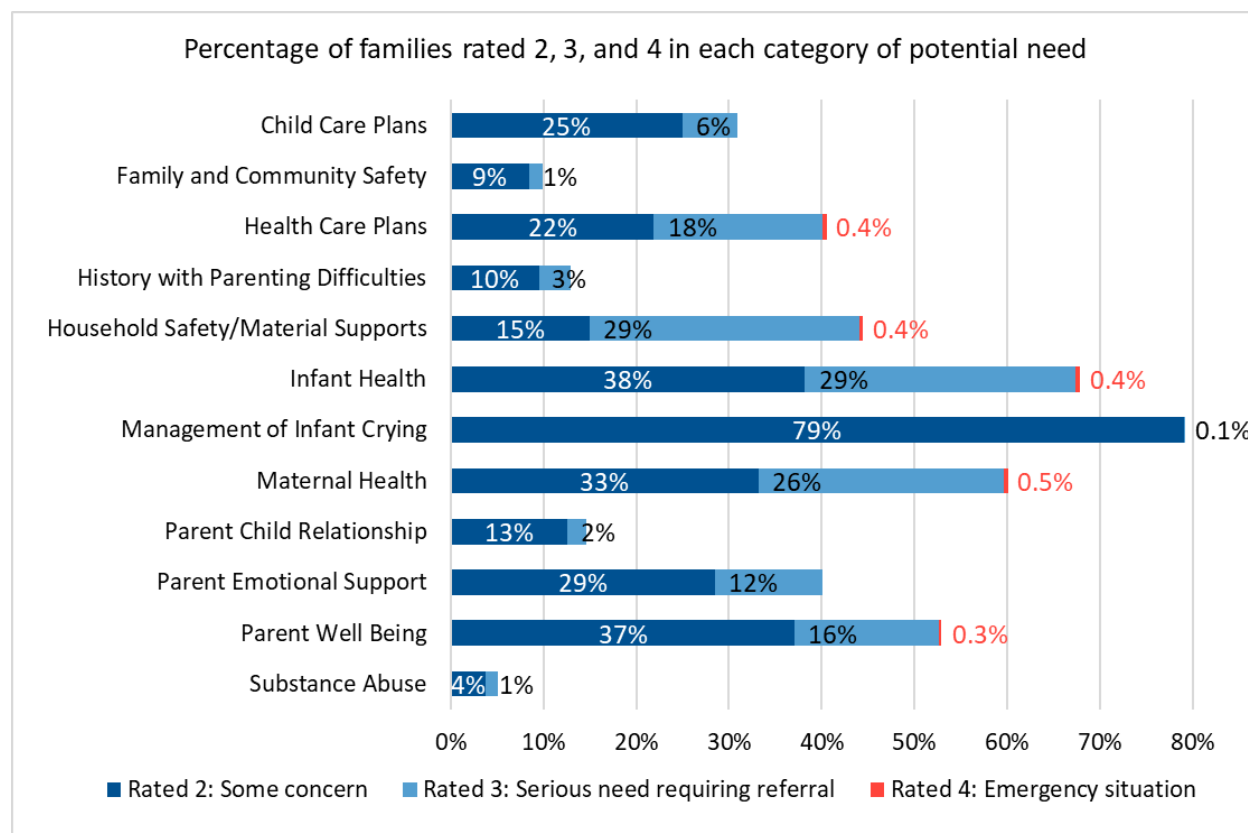
## In-home visit ratings to identify needs, risks, and emergencies

During in-home visits, nurses evaluated the well-being of caregivers, infants, and their families in twelve categories of potential need. For each category, nurses rated the family's situation on a scale that ranged from 1 (no concerns or immediate needs) to 4 (a situation requiring immediate linkage with emergency resources). The ratings that nurses assigned for these categories were available for 755 of the 768 clients served by Family Connects in Travis County during 2019.

**Out of 768 total families served, 95.4% had at least one need that was identified and addressed during their in-home visit.** For example, nurses assigned a rating of 2 for *management of infant crying* to 79% of all families, meaning that caregivers had concerns about infant crying that were addressed through discussion or education during the nurse's first visit. Nurses addressed concerns about *infant health* in 38% of all visits, and offered discussion or education regarding *parent well-being* (mental health) to 37% of all families.

**Nurses identified at least one serious concern or need requiring referral among 70.3% of all families.** Relatively high need for referral to resources was seen in the category of *infant health*, with 29% of all families needing a referral in this area (typically to a pediatrician). An equal percentage of families required referral in the area of *household safety and material supports*; families experiencing this area of need were often referred for nutrition assistance (e.g., SNAP, WIC). The next most common categories of need were *maternal health* (26% of all families) and *health care plans* (18% of all families).

**For 11 families (1.4%), nurses identified at least one emergency situation that required immediate resources.** A total of 15 emergency situations were identified among these families.



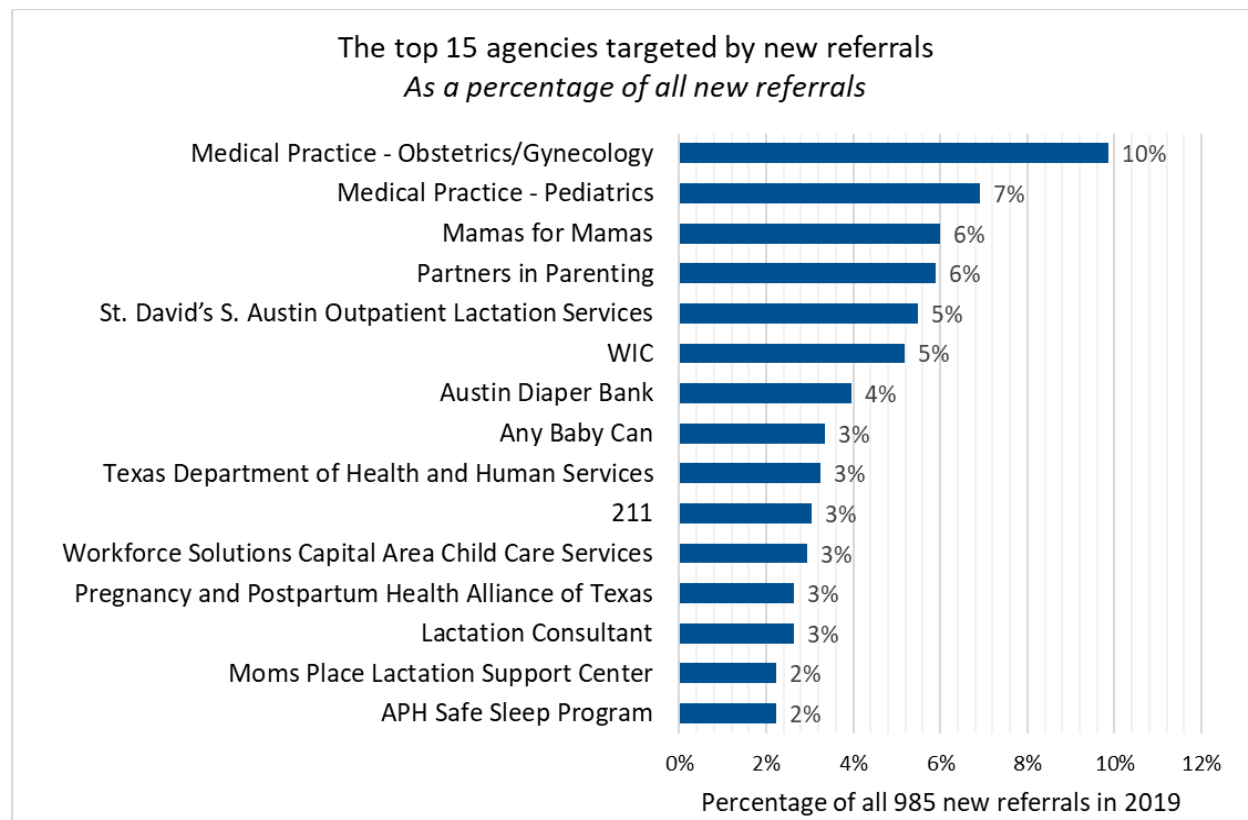
## Emergency situations identified during in-home visits

Nurses identified that four families were experiencing an emergency in the area of *maternal health*. For example, in two of these cases nurses found that mothers had extremely elevated blood pressure requiring immediate medical attention. Two additional families experienced emergencies in the area of *parent well-being*. In both of these cases, caregivers scored extremely high on a measure of post-partum depression and reported experiencing thoughts of self-harm. Nurses immediately connected these caregivers with mental health services.

Three families experienced emergencies in the areas of *infant health* (e.g., one infant was experiencing choking episodes). An equal number of families experienced emergencies in the area of *health care plans*. In these three cases, nurses identified that caregivers were delaying medical treatment for themselves or their infants due to a lack of health insurance. Nurses also identified 3 families with emergency needs in the area of *household safety and material supports*. These families were respectively connected with utility bill assistance, services for families affected by abuse, and resources to provide a safe sleeping area for infants.

## Most common agencies (or types of services) targeted by new referrals

For the 432 families that received at least one new referral, nurses intended to create a new connection between the family and some agency that could help them obtain necessary resources. Nurses made a total of 985 new referrals to agencies in Travis County. The greatest percentage (10%) of new referrals linked caregivers to a medical practice specializing in Obstetrics/Gynecology, followed by 7% of new referrals linking caregivers to a pediatrician. Two organizations offering parenting support were each targeted by 6% of all new referrals: Mamas for Mamas and Partners in Parenting.



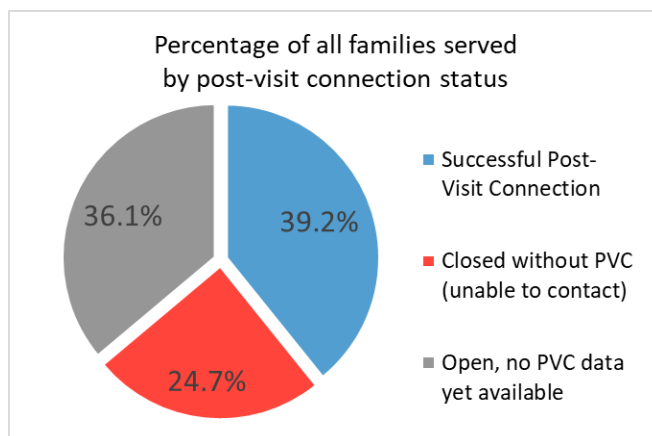
## Post-Visit Connections

### Follow-up discussions after in-home visits

During a post-visit connection, clients answer questions about their experience with Family Connects and whether they have contacted agencies or received services.

Overall, 39.2% of the 768 families served by Family Connects in 2019 have had a successful post-visit connection.

An additional 36.1% of families have no data, meaning that no post visit connection has yet been attempted.



The remaining families (24.7%) have had their cases closed without a successful connection. In almost all of these cases, staff have been unable to contact the family within protocol limits.

The demographics of clients who participated in post-visit connections were similar to overall client demographics in terms of race, maternal age, and number of pregnancies. However, Latinos represented 39.1% of all clients served but only 27.9% of clients with successful post-visit connections.

### Families that connected to services

Successful post-visit connections have allowed nurses to determine whether clients eventually received services for 30% of all new referrals made during 2019. In this sample of clients who received new referrals, nurses found that **78% of clients who contacted the recommended agency received services.**

### When connections were not made, what went wrong?

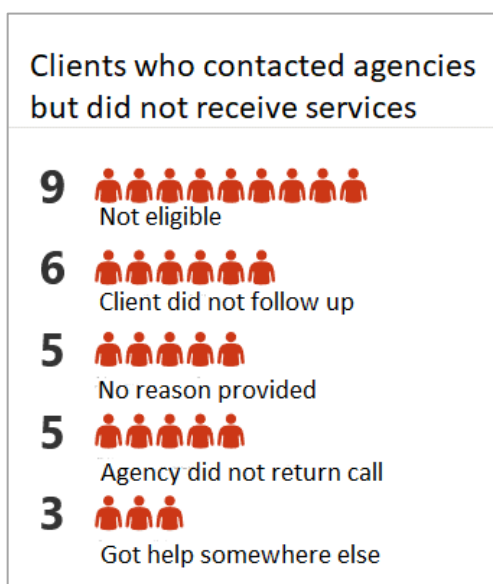
For a total of 29 new referrals made, clients reported that they had contacted the recommended agency but did not receive services.

In roughly one-third of these cases, clients did not meet eligibility criteria to receive services.

The second most common reason was that clients did not follow up. For example, one client did not go through with her referral because of lack of transportation.

There were 5 clients who reported that they contacted agencies but service providers did not return their calls.

Finally, in 3 cases clients decided to get help at a different agency than their referral. For example, a nurse wrote “client states she contacted [the agency] and they were very helpful, but they were able to get a sooner appointment [at a different provider].”



## How do clients feel about Family Connects?

Out of the 301 caregivers who successfully completed a post-visit connection, **99% said that overall the Family Connects experience was helpful.**

Things that clients liked about family connects included the comfort and ease of a home visit, kind and supportive nurses, and connection to new resources.

- *"I loved the visit. I loved the fact that it was at 6 weeks so something between the 2 week wellness check and her 2 month check up. As a first time mom I needed that assurance that I'm doing a good job as I had no previous experience with babies. Especially them (the RN) seeing me at home in action with the baby it helped boosting me that I got this. It was so great and I'm so grateful for it."*
- *"As a first time mom there's a lot of stress and anxiety. The nurse answered a lot of our questions and brought those stress levels down. Liked that they took the baby's weight and brought a book that was dual language (Eng & Spa). The nurse was really informative and helpful."*
- *"I like that she provided a lot of information on other resources that we weren't aware of. She helped connect us to a resource for getting insurance for our son; she even called while in the house to see what we needed to bring!"*
- *"I liked all the attention to postpartum. Having someone come to the home, especially since I was in pain, was very helpful. I didn't feel rushed."*
- *"It was helpful to actually look at the baby rather than explaining it to someone over the phone. It was nice to have someone tell the parents that things are being done right--even as a second-time parent. The convenience of receiving someone at home was also nice."*
- *"It was my second time breastfeeding, you forget stuff, never done it with a toddler. My nurse was very helpful in thinking through how to juggle it all. She really understood my situation and supported by desire to get infant's tongue tie corrected. My pediatrician kept putting me off in regards to a referral, but I pushed, a lot due to my nurse. She validated me. I finally got the referral and had the procedure done. Right away I felt relief and less tension."*
- *"It was way more in depth than expected, which was good. Talked about infant preference to black and white images, PURPLE crying, and many other things. Was surprised that nurse checked in on how mom was doing as well."*

When asked what could be improved, the majority of clients did not have suggestions. However, some clients mentioned that they would have preferred more information in advance regarding the home visit's length of time or topics to be addressed. A few clients mentioned that they would prefer to have more than one visit through Family Connects.