

**Healthy Families Brevard
Annual Service Summary
July 1, 2005 - June 30, 2006**

Healthy Families Brevard (HFB) began serving families in Brevard County in March 1999. HF Brevard serves families within targeted zip codes. The zip code areas where services are provided include: 32754 in Mims, 32796 in North Titusville, 32780 in Titusville, 32927 in Port St. John, 32926 and 32922 in Cocoa, 32953 in Merritt Island, 32955 in Rockledge, 32935 in Eau Gallie, 32901 in Melbourne and 32905, 32907, 32909, and 32950 in Palm Bay. HF Brevard often refers to areas of the county as North, Central and South. North zip codes consist of the Mims, Titusville and Port St. John areas of the county. The Central HF Brevard team serves families in Cocoa, Merritt Island and Rockledge. The South teams serve the Eau Gallie, Melbourne and Palm Bay areas of the county. HF Brevard is currently funded to serve 340 families within these targeted zip codes of the county.

An annual service summary is completed in order to evaluate and analyze the provision of services within Brevard County. This summary includes a review of the program's target population, referral system, acceptance and refusal rates for assessment and enrollment, retention and home visitation completion rates and an analysis of personnel turnover. A cultural review of program services is included as well.

Target population

Demographic data obtained from <http://easidemographics.com> yielded specific population statistics for Brevard County in the targeted zip code areas served by HF Brevard. The overall population of Brevard County has increased by 58,905 in the last six years with a current total population of 535,135 as of January 1, 2006. This reflects a 12.4% population growth. The population by zip code has increased dramatically also with specific growth indicated in the following chart:

Zip Code	Population 4/1/2000	Population 1/1/2006	Population Change (%)	Percent of total population 2006
32754	9871	11,134	1263 (13%)	2%
32796	19,958	20,679	721 (4%)	4%
32780	31,346	34,044	2698 (9%)	6%
32927	26,303	30,912	4609 (18%)	6%
32926	19,982	22,697	2715 (14%)	4%
32922	15,606	15,815	209 (1%)	3%
32953	21,624	23,564	1940 (9%)	4%
32955	25,032	29,910	4878 (19%)	6%
32935	40,149	42,063	1914 (5%)	8%
32901	22,058	23,394	1336 (6%)	4%
32905	22,526	23,528	1002 (4%)	4%

32907	34,303	40,941	6638 (19%)	8%
32909	18,023	22,388	4365 (24%)	4%
32950	3741	4414	673 (18%)	1%
Total	310,522	345,483	34,961 (163%)	65%

Based on the information above, the targeted zip codes served by HF Brevard represent 65% of the total population of Brevard County. There has been tremendous growth in the targeted zip codes with 7 or over 50% of the thirteen targeted zip codes having growth rates that exceed the population growth for the County

Since HF Brevard serves a specific age group based on women of child bearing age, an analysis was completed to look at the demographics of age specific to females in the targeted zip code areas which the program serves. For the purpose of this analysis, the age group 12 to 44 years of age was determined to be the age of women who are of child bearing age.

Zip Code	Number of females 0 to 11 years old	Number of females 12 to 44 years old	Number of females 45 years and older	% of total females	% of females who are of child bearing age
32754	699	1973	2288	50%	66%
32796	1531	4250	4538	52%	41%
32780	2138	6270	7917	52%	62%
32927	2289	6376	3941	48%	51%
32926	1510	4257	3950	49%	56%
32922	1385	3803	2960	52%	47%
32953	1522	4476	5117	51%	40%
32955	998	5366	5908	52%	41%
32935	2664	9070	8854	51%	44%
32901	1249	4164	5945	51%	37%
32905	1467	1611	5413	52%	41%
32907	2883	8052	6582	51%	46%
32909	1651	4518	2974	51%	49%
32950	217	754	854	49%	41%
Total	22,203	64,940	67,241		

It is estimated that there are 64,940 women of childbearing age in the targeted zip code areas served by HFB. For FY 05-06, Brevard County had 3980 births in the targeted zip code areas served by the project. This information is further broken down by zip code in the chart below:

Zip Code	Number of live births
32754	102
32796	206
32780	349
32927	294
32926	240
32922	304
32953	237
32955	383
32935	464
32901	235
32905	317
32907	512
32909	318
32950	19
Total	3980

Since the majority of families who enroll in the HF Brevard program are single parents based on this being a primary screening criteria for assessment, an analysis was completed on the marital status of women with children in the targeted areas served by HF Brevard.

Zip Code	Number of Married Women with children under 18 years old	Number of Single Women with children under 18 years old	% of married women who have children under 18 years old	% of single women who have children under 18 years old
32754	836	279	36%	48%
32796	1716	674	41%	54%
32780	2311	1057	34%	52%
32927	2809	724	52%	52%
32926	1682	651	41%	51%
32922	863	1081	40%	61%
32953	1744	728	38%	52%
32955	2235	692	38%	50%
32935	3033	1278	38%	47%
32901	1014	824	29%	51%
32905	1391	885	34%	51%
32907	3744	980	48%	52%
32909	1985	585	51%	52%

32950	371	53	39%	37%
Total	25,734	10,491		

Based on information from <http://easidemographics.com>, the total population reported their race as follows: 83% White Alone which is higher than the U.S. percentage of 67%, 9.2% Black Alone which is lower than the U.S. percentage of 11%, 1% Asian Alone, which is lower than the U.S. percentage of 3%, 4% Hispanic which is lower than the U.S. percentage of 11% and 3% other which is lower than the U.S. percentage of 8%. Additional information on race by targeted zip code area is indicated below:

Zip Code	White Alone	Black Alone	Asian Alone	Hispanic	Other
32754	8702 (87%)	943 (9%)	36 (1%)	124 (1%)	190 (2%)
32796	17,092 (83%)	2192 (11%)	178 (1%)	575 (3%)	496 (2%)
32780	26,992 (83%)	3186 (10%)	346 (1%)	1141 (4%)	822 (2%)
32927	23,391 (86%)	1749 (6%)	272 (1%)	923 (4%)	891 (3%)
32926	6346 (83%)	941 (12%)	41 (1%)	149 (2%)	167 (2%)
32922	9054 (55%)	5733 (35%)	143 (1%)	765 (5%)	676 (4%)
32953	18,713 (83%)	1842 (8%)	393 (2%)	906 (4%)	676 (3%)
32955	20,864 (81%)	3130 (12%)	418 (2%)	817 (3%)	620 (2%)
32935	36,028 (85%)	1717 (4%)	945 (2%)	2134 (5%)	1459 (4%)
32901	7365 (75%)	1704 (17%)	147 (1%)	398 (4%)	266 (3%)
32905	17,862 (73%)	2781 (11%)	484 (2%)	2081 (8%)	1399 (6%)
32907	10,385 (79%)	1314 (10%)	174 (1%)	842 (7%)	436 (3%)
32909	14,885 (77%)	1952 (10%)	276 (1%)	1459 (7%)	910 (5%)
32950	3517 (92%)	94 (2%)	44 (1%)	91 (2%)	86 (2%)

In Brevard County, English continues to be the major language spoken with 8.7% reporting that they speak a language other than English. The chart below indicates specific linguistic information based on the targeted zip code area served by HF Brevard. The statistics presented are based on the primary language spoken by individuals over the age of five years old.

Zip Code	Number of people that speak English	Number of people that speak Spanish	Number of people that speak another European language	Number of people that speak an Asian language	Number of people that speak another language
32754	9036	112	192	33	15
32796	17,709	552	422	100	19

32780	27,483	904	965	192	94
32927	23,169	688	529	271	12
32926	17,559	679	390	144	54
32922	13,356	646	326	97	39
32953	18,776	763	525	258	45
32955	22,026	766	563	148	139
32935	34,413	1679	1164	593	154
32901	18,613	910	882	265	273
32905	18,311	1401	842	271	451
32907	28,037	2734	915	429	61
32909	14,970	1032	557	201	0
32950	3334	13	135	67	12
Total	266,792	12,879	8407	3069	1368

When looking at the educational attainment in Brevard County, among individuals over 25 year old and in the labor force, 46,264 have less than a high school diploma, 98,084 have a high school diploma or GED, 115,005 have some college or an associate degree, and 79,951 have a Bachelor's degrees or higher.

Zip Code	Less than High School	High School Diploma or GED	Some College or Associate Degree	Bachelor's degree or higher
32754	1652	2437	2042	898
32796	2055	4547	4689	2460
32780	3151	6417	7994	4939
32927	2252	5955	6558	2340
32926	2348	4267	4419	2145
32922	2803	3292	2745	1122
32953	1820	4033	5386	4144
32955	2235	5031	6143	4503
32935	3867	8843	10,299	5508
32901	3173	4776	4566	2765
32905	2726	5022	5334	2734
32907	3407	6930	8118	4052
32909	1978	3771	4226	1474
32950	330	790	999	588
Total	33,797	66,111	73,518	39,672

The economic conditions of Brevard County like many other areas in the State of Florida are rapidly changing. A final analysis of the population of Brevard County is based on income and household characteristics related to homeowners or renters as many of our families struggle financially and live with others or rent their homes. In Brevard County, \$40,631 is the median household income, 85,642 households are below the median

income while 76,707 households are above the median income. The median rent for Brevard County is \$526 with 147,995 homeowners and 50,200 renters. The chart below provides information on each of these areas by zip code.

Zip Code	Median Household annual income	Number of households below the median income	Number of households above the median income	Median monthly Rent	Number of Homeowners	Number of renters
32754	\$37,342	1868	1346	\$374	3488	485
32796	\$37,663	3654	2802	\$413	5926	1851
32780	\$39,244	6125	5054	\$447	9489	4157
32927	\$44,858	3265	3815	\$594	7685	1144
32926	\$40,589	3221	2861	\$466	6244	1251
32922	\$24,303	2124	3217	\$361	3388	3223
32953	\$43,616	3639	3859	\$452	6495	2481
32955	\$46,197	3536	4485	\$597	8159	1787
32935	\$36,690	8436	5580	\$541	11,505	6198
32901	\$36,599	2407	1477	\$420	5235	4247
32905	\$25,552	355	252	\$511	5941	4219
32907	\$42,520	4805	4812	\$613	10,512	1797
32909	\$40,106	2745	2315	\$566	5230	1177
32950	\$52,500	699	411	\$424	1352	118
Total		46,879	42,286		90,649	34,135

Referral System

HFB has continued to maintain agreements with the hospital systems within the county. HF Brevard receives referrals from Holmes Regional Medical Center, Parrish Medical Center, Cape Canaveral Hospital, Wuesthoff Health Systems, Healthy Start and other various community agencies. There were 2259 (1820 in prior year) screens during this period which included 715 (648 in prior year) HFF Record Screens, 1156 (1096 in prior year) Healthy Start Universal Screens with consent to share information with HFF and 388 (76 in prior year) Healthy Start Postnatal Screens with consent to share with HFF. The number of births for FY 2005-06 in the targeted zip codes that HFB serves was 3980 (3780 in prior year). Therefore, HF Brevard accessed screening information on 57% of the live births in the targeted zip code areas served by the project which is a 9% increase compared to last year.

Screens are picked up at the CHS office on a weekly basis. For FY 05-06, the number of screens has increased by 439 screens. This increase in screens received has resulted in a 9% increase in our screening rate. In addition, it is difficult to assess the number of screens that are not received due to being negative or refused screens. This is particularly the case in the hospital systems which do not send screens these screens to HFB due to confidentiality issues.

HF Brevard and Healthy Start staff are no longer co-located but still communicate on a regular basis and referrals and trainings between the two programs are frequent.

Healthy Start prenatal screens in our targeted zip codes are picked up weekly by the PM and given to our data entry person who disperses them to the Family Assessment Workers who then contact the families. The area hospitals fax the record screens directly to the data entry person for distribution.

HF Brevard also has formal written agreements with Healthy Start, Community Based Care of Brevard, Even Start, Serene Harbor, The Brevard County Salvation Army Domestic Violence Program, The Women’s Center and The Children’s Center and its organizational partners in the north area of the county. Informal agreements exist between the Brevard County Health Department (includes the SAM/SEN program), the Early Steps Program, Child Care Association, Parent Connection, Wuesthoff Medical Center, Parrish Medical Center, and Health First.

Refusal rates

Of the 2259 total screens received during the year, 2062 (91%) were positive screens and 265 (13%) of those screening positive then refused the assessment portion of the program. This is a slight (3%) decrease from the 16% refusal rate for last fiscal year. In order to understand the refusal rate, comprehensive data has been collected to look at the demographics of who is refusing the program. The results yielded the following for screens reviewed from July 2005 through June 2006 (N= 270):

Screen	Number (%)	Zip Code	Number (%)	Pre/ Postnatal	Number (%)	Age	Number (%)
HFF	82 (30%)	32754 (North)	3 (1%)	Postnatal	144 (53%)	Under 15	0 (0%)
Healthy Start Prenatal	136 (50%)	32796 (North)	5 (2%)	Prenatal	126 (47%)	15-19	51 (19%)
Healthy Start Postnatal	49 (18%)	32780 (North)	24 (9%)	Unknown	0 (0%)	20-29	166 (61%)
Other	3 (1%)	32927 (North)	8 (9%)			Over 29	50 (19%)
		32926 (Central)	7 (8%)			Unknown	3 (1%)
		32922 (Central)	11 (13%)				
		32953 (Central)	30 (11%)				
		32955	28				

		(Central)	(10%)				
		32952 (Central)	1 (0%)				
		32935 (South)	31 (11%)				
		32901 (South)	13 (5%)				
		32905 (South)	30 (11%)				
		32909 (South)	18 (7%)				
		32907 (South)	25 (9%)				
		32950 (South)	1 (0%)				
		32934	1 (0%)				

Race	Number (%)	Education	Number (%)	Marital Status	Number (%)
Black	48 (18%)	High School	129 (48%)	Single	225 (83%)
Hispanic	9 (3%)	No High School	77 (29%)	Married	40 (15%)
Other	20 (7%)	Unknown	64 (24%)	Unknown	5 (2%)
Unknown	57 (21%)				
White	136 (50%)				

Reason for refusal	Number (%)
Not interested	204 (76%)
Does not like HV model	8 (3%)
Did not give refusal reason	1 (0%)
Does not need services	2 (1%)
Knows enough	16 (6%)
Has Healthy Start program	17(6%)
Too busy (Working)	12 (4%)
Has plenty of support	9 (3%)
Only interested in child birth classes	1 (0%)

The data indicates that the majority of refusals are white prenatal families ages 20-29 from several zip code areas in the county. The majority have a high school education and are single. The main reason for refusal is not interested. To address the refusal rate, HFB will continue to provide education and information to all areas of the County. The HFB team attend trainings and events throughout the county on a regular basis to promote the program. It is interesting to note that our age group for refusals is shifting from ages 18-24 to ages 20-29 and we are simultaneously seeing closures increase due to working full time. It is imperative that FSW staff keep a flexible schedule in order to see families and accommodate these work and/or school schedules.

Two FAWs completed assessments this year – FAW 1 had an acceptance rate of 66.3% and FAW 2 had an acceptance rate of 76.5%. FAW 1 works in the North/Central area where refusals are more common due to the rural area, lower number of births, and more availability of services for families in need. It is also interesting to note that FAW 2 was FAW 1 (acceptance rate of 51%) last FY indicating that it may be area more than FAW impacting this outcome.

In addition, of the remaining positive screens that were not assessed, the following reasons were given for not assessing:

Reasons for Not Assessing Positive Screens	Number Not Assessed	Percentage of Those Screened Positive but Did not Refuse Assessment (n = 1797)
Unable to Locate Prior to Assessment	1239	69%
Moved Out of Service Area Prior to Assessment	36	2%
Child Adopted/Miscarried/Died Prior to Assessment	22	1%
Other Reasons Not Assessed	88	4%

For the annual service summary, the program acceptance rate is the percentage of eligible families that were offered and accepted home visiting services.

The assessment acceptance rate is the percentage of eligible screens who were offered and accepted an assessment.

The refusal rates were analyzed for those determined to be eligible for services. There were 418 completed assessments during the fiscal year. This is a slight decrease from the 427 assessments completed last fiscal year. This number represents 20% of the

number of positive screens received. Of the 418 completed assessments, 77 (18.4%) were negative assessments.

Of the 341 completed positive assessments, 24 eligible families refused services at time of assessment; therefore, our acceptance rate at assessment is 93%. The North FAW had the highest refusal rate at 62% of the refusals at time of assessment. Of the 341 completed positive assessments, an additional 47 refused during creative outreach; therefore our program acceptance rate based on 71 refused assessments is 71.6%.

One hundred and seventy nine individuals that were assessed enrolled in the program. Of the 91 remaining positive assessments, the following reasons were given for not then enrolling in the program:

Reason Given for Not Enrolling in Program	Number of Families Giving Reason	Percentage of Families Giving Reason
Unable to Locate	30	33%
Moved out of Service Area	10	11%
Had Active CPS Cases	8	9%
Referred to Another Service	0	0%
Target Child Died (Miscarried)	3	3%
Target Child Adopted	1	1%
Other	1	1%
Refused CPS check	3	3%
Situational capacity	35	39%

After the refusal rate, situational capacity had the highest percentage when analyzing why the families did not enroll. Second, was unable to locate. In order to address this issue, HFB continues to use a form that was developed to be used at time of assessment which the families indicate the best time to reach them and alternate contacts. This is to ensure that we have all needed contact information for families. Assessments are also turned around very quickly so that the first attempt to contact the family after assessment can be made as quickly as possible. One challenge in locating families is the time factor involved. HFB received 493 more screens in FY 05-06 yet there is the same number of FAWs to contact these families.

The acceptance rate was also analyzed by zip code and yielded the following information:

Zip code	HFF screen Refusals	HS Universal Screen refusals	HS postnatal screen refusals	Acceptance Rate
32780 (North)	4	12	9	60%
32796 (North)	1	3	2	79%
32754 (North)	1	2	0	57%
32901 (South)	1	10	3	71%

32934 (South)	0	0	1	75%
32905 (South)	0	17	7	56%
32907 (South)	0	15	8	66%
32909 (South)	1	14	5	53%
32935 (South)	1	26	6	60%
32950 (South)	0	1	0	50%
32922 (Central)	26	0	0	62%
32927 (Central)	4	8	4	58%
32953 (Central)	18	11	1	51%
32955 (Central)	18	6	3	55%
32926 (Central)	7	6	1	67%
32952 (Central)	0	0	0	100%

In analyzing the type of screens, it appears that HF Brevard has the lowest refusal rate among those that had completed the Healthy Start Universal Prenatal Screen which yielded an 11% refusal rate. There was a 15% refusal rate with the HFF Record screen and a 13% refusal rate with the Healthy Start postnatal screen. The refusal screening rate for FY 05-06 is 12.8% which is a decrease from the consistent 15 to 16% that has occurred for the last three fiscal years.

Based on the above figures, it is clear that the most significant issues related to assessments not getting completed are FAWs not being unable to locate the families. Even so, HF Brevard completed an average of 35 assessments per month with the goal being 40 per month. FAW 1 had 15 (9.4%) negative assessments while FAW 2 had 41 (20.8%) negative assessments. FAW 2 is in the south area of the county where there are more births and individuals tend to be in a better economic position with extended family and friends for support.

This analysis clearly indicates that there is a higher acceptance rate in the south area of the county which is to be expected given the difference in populations. The south area of the county is less rural with families that tend to be more inviting of strangers into their homes. Also the south area has the highest number of births in the County. The central area has the lowest acceptance rate which may be a result of a lot of resources within this area of the community which target at risk families. The North area which is in the middle of the other two areas regarding acceptance rate is more rural in nature with word of mouth being the primary way that families allow people into their homes. It is also important to note that FAW 1 does all of the assessments for the Spanish speaking only population which due to trust issues among this population could lead to a lower acceptance rate. The table below indicates demographic information related to refusals at assessment and creative outreach. (N = 71)

Screen	Number (%)	Zip Code	Number (%)	Pre/ Postnatal	Number (%)	Age	Number (%)
HFF	27 (38%)	32754 (North)	1 (1%)	Postnatal	44 (62%)	16	2 (3%)
Healthy	31	32796	3 (4%)	Prenatal	27	17	3 (4%)

Start Prenatal	(44%)		(North)			(38%)	
Healthy Start Postnatal	13 (18%)		32780 (North)	11 (15%)			18 3 (4%)
			32927 (North)	7 (10%)			19 6 (8%)
			32926 (Central)	9 (13%)			20 8 (11%)
			32922 (Central)	8 (11%)			21 3 (4%)
			32953 (Central)	3 (4%)			22 6 (8%)
			32955 (Central)	7 (10%)			23 4 (6%)
			32935 (South)	3 (4%)			24 6 (8%)
			32901 (South)	6 (8%)			25 4 (6%)
			32905 (South)	4 (6%)			26 4 (6%)
			32909 (South)	3 (4%)			27 2 (3%)
			32907 (South)	6 (8%)			28 2 (3%)
							29 3 (4%)
							30 4 (6%)
							31 1 (1%)
							33 2 (3%)
							34 1 (1%)
							36 1 (1%)
							37 2 (3%)
							38 1 (1%)
							39 1 (1%)
							40 1 (1%)
							Unknown 1

FAW	Number (%)	Score Range MOB	Number (%)	Score Range FOB	Number (%)
North/Central	35 (49%)	0-12	0 (0%)	0-12	39 (55%)
South	36 (51%)	13-20	21 (30%)	13-20	20 (28%)
		21-30	10 (14%)	21-30	9 (13%)

		31-40	19 (27%)		31-40	1 (1%)
		41-50	13 (18%)		41-50	2 (3%)
		51-60	4 (6%)		51-60	0 (0%)
		Over 60	4 (6%)			

Reason for refusal	Number (%)
Not interested	39 (55%)
Does not like HV model	10 (14%)
Knows enough	3 (4%)
Feels program will be too intrusive	4 (6%)
Too busy (Working)	10 (14%)
Other	5(7%)

In analyzing the above data, it appears that the highest refusal rate comes from those screened using the Healthy Start prenatal screen which is not surprising since most referrals are obtained this way. The refusals by zip code are evenly distributed when taking into account the births in each area. Age and FAW do not yield any significant results. The most revealing information comes from the assessment scores with higher scores noted for both MOB and FOB when compared to last FY. For example, the highest score for MOB last fiscal year was under 50 when this FY 12% of the scores for MOB are greater than 50.

The program also analyzed assessment information by area of the county in order to obtain additional information on any significant trends. This analysis yielded the following results when looking at completed assessments:

North:

Number of assessments completed: 118
Number that Refused at Assessment: 6 (5.1%)
MOOSA: 5 (4.2%)
Unable to Locate: 9 (7.6%)
Child Adopted/Miscarried/Died: 1 (0.8%)
Consented to participate: 53 (44.9%)
Active CPS Case: 2 (1.7%)
Scored Out: 12 (10.2%)
Situational Capacity: 5 (4.2%)
Refused During Creative Outreach: 25 (21.2%)

Central:

Number of assessments completed: 107
Number that Refused an Assessment: 11 (10.3%)
MOOSA: 1 (.9%)
Unable to Locate: 8 (7.5%)

Child Adopted/Miscarried/Died Prior to Assessment: 1 (.9%)
Consented to participate: 39 (36.4%)
Active CPS Case: 4 (3.7%)
Scored Out: 15 (14%)
Situational Capacity: 21 (19.6%)
Refused During Creative Outreach 7 (6.5%)

Melbourne:

Number of assessments completed: 53
Number that Refused at Assessment: 1 (1.9%)
MOOSA: 1 (1%)
Unable to Locate: 2 (3.8%)
Child Adopted/Miscarried/Died: 1 (1.9%)
Consented to participate: 29 (54.7%)
Active CPS Case: 1 (1.9%)
Scored Out: 13 (24.5%)
Situational Capacity: 4 (7.5%)
Refused CPS Check: 1 (1.9%)
Refused Program During Creative Outreach: 1 (1.9%)

Palm Bay:

Number of completed assessments: 140
Number that Refused at Assessment: 6 (4.3%)
MOOSA: 4 (2.9%)
Unable to Locate: 11 (7.9%)
Child Adopted/Miscarried/Died: 1 (.7%)
Consented to participate: 58 (41.4%)
Active CPS Case: 1 (.7%)
Scored Out: 37 (26.4%)
Situational Capacity: 5 (3.6%)
Refused CPS Check: 2 (1.4%)
Refused Program During Creative Outreach: 14 (10%)
Other: 1(.7%)

Service Delivery

An important component of the quality assurance process with HF Brevard is the monthly supervisory review of completed and attempted home visits by Family Support Worker within their team. Supervisors are required to compile the information on a monthly basis and submit to the PM within the specified time frame and the staff is informed of their home visit completion rates for the month. HF Brevard provided 6550 home visits during the fiscal year (4834 of them completed home visits). The overall home visit completion rate is 84.17% which is a slight decrease when compared to last fiscal year. More home visits are offered (1716 to be exact) than are completed due to families missing home visits because they are not home or may have a crisis. At times staff may have crisis as well which prevents them from completing their home visits.

When this occurs, all attempts are made to meet the families. This is done by other FSWs or by the FSWS.

In addition, it was documented that 1231 referrals were made to participants. Program management worked with the staff in order to more accurately capture the referrals that are being provided to families. This is shown by capturing 140 more referrals when compared with last fiscal year.

Cultural Competence

The HF Brevard program continues to strive to make services as culturally sensitive as possible. Program brochures, program forms, educational handouts and curriculum used have all been purchased in the primary languages spoken by participants. The brochure that is used was downloaded from the HFF website and utilizes child style drawings. The program offers flexible scheduling centered on religious holidays of the service population. Services are provided to the families in their language spoken and every effort is made to have internal staff available in order to provide services to that family. The project has worked with other community providers in order to provide services to families who speak language that staff cannot assist with and in situations of hearing impairment. For Spanish speaking families, there are at least two Spanish speaking staff in each satellite office who can take calls.

Staff of HF Brevard continues to receive training on cultural competence according to HFF guidelines. The Program Supervisor II is responsible for coordinating training efforts in order to ensure that staff receives the necessary training. Staff also has additional resources available in books and Internet access in order to receive additional information on a particular cultural issue if so needed. Staff are trained annually on cultural sensitive practices. The training is structured and based on different American cultures. Staff are asked to share experiences from their own culture. Training typically occurs in September each year although this year it occurred in November and included trainings on multigenerational families and families that have multiple participants living in the same household as this appears to be a characteristic of some of the families we serve.

The program continues to encourage the participation of fathers in the HF Brevard program. Family Support Workers have stated their excitement to see fathers involved. Though the numbers of fathers actively participating in the program are still small, the program is committed to doing what it can to continue to provide father-friendly services by attending trainings on the subject and utilizing curriculum that shows the importance of a father's role in the life of the child. Supervisors also continue to inquire about the father's presence during supervision and discuss ways to engage him in services. FAWs encourage father's presence during the assessment whenever possible. We have 6 primary participants who are fathers including a recent graduate.

Opportunities for Family Input

Satisfaction surveys are offered to participants during March and September of each year. The completed surveys are sent to HFF for analysis. Families also completed a Staff/Site Cultural Competence Survey during the fiscal year. The results are attached. Families responded in a positive manner to the questions presented and the survey gave the staff an indication of areas that are working well in the area of cultural competence and a few areas that should be investigated further. The great majority of families indicated that they felt their cultural beliefs and actions were respected. The areas that continue to need further investigation are the understanding of culture related to child care and discipline. This is an issue that is discussed within supervision as it creates challenges for the family support worker.

Opportunities for Staff Input

Program Supervisors meet with their staff in team meetings which are held at least twice a month. All staff are required to attend their team meeting as it is an opportunity for the supervisors to pass on pertinent information that relates to the program. This is also an opportunity for staff to share successes, ask questions and share ideas for improvement. Program Management also meets with the staff on a regular basis to discuss policy changes, review the status of outcomes, discuss community events and share successes. The staff has the opportunity to ask questions of management and each other and provide suggestions for improvement. HFB management staff also meets on an annual basis to review policies and procedures and to incorporate any changes.

Staff completed a cultural survey whose results are attached. Staff identified several issues and provided some useful ideas for addressing these issues. The comments made by staff primarily focused on the Hispanic community. HFB staff expressed an interest in getting families from this community more involved with the program as well as having materials more specifically designed not only for language but culture as well. HFB has materials in English and Spanish and are based on an average reading level to reach the families in the community.

HFB staff wanted more staff involvement as well. All staff do participate in cultural training annually and are given the opportunity to request specific areas of training for specific populations. HF Brevard management staff also look at trends and provide training on issues specific to cultural trends identified.

Cultural events were identified as an area in which HF Brevard could do some additional work in program promotion. This provides another way to do community outreach by reaching specific groups of people by their culture or ethnicity instead of the traditional outreach methods of participating in events which seek to attract those who are expecting a child. Finally, there were requests for more training on cultural issues in the future. HFB like many other programs providing social services is struggling with the issue of assisting families that do not speak English and may not have legal status. HFB will look

at these issues and have further follow up in staff and supervisor meetings to determine how these issues can be addressed.

Opportunities for Community Input

Communication occurs on a regular basis with community partners in order to continue to foster good working relationships. The collaboration with the Healthy Start program has been an important component of the HF Brevard program. The Director of the Healthy Start Coalition of Brevard, Inc. has been a key ally in the provision of HF services. HFB also continues to be a partner in the Children Center in the north area of the county. Regular meetings occur in which the program is given the opportunity to collaborate with other agencies that are serving young children in a one-stop center for families. HFB recently participated in the Fall Festival at the Children Center. The PM will participate in a strategic planning session for the Center in February 2007.

Advisory Council

The Advisory Committee for HF Brevard is the United Way of Brevard County's Grant/Contract Oversight Committee. The group consists of representatives from Brevard County Housing and Human Services, Brevard WorkForce Development, the United Way Board, Community volunteers and is Chaired by the COO of Holmes Regional Medical Center which has the largest number of births in the County.

The Advisory Committee consists of 7 representatives with a broad age range. Forty-three of the members are female with 29% of the members black and the remaining members white. The committee provides input into program policy and design, review of program budget, an opportunity for community collaboration and continued oversight of the HF Brevard project. The group has an opportunity to review the Annual Service Summary and provide input into areas that require attention.

The Advisory Council reviewed the last Annual Service Review on January 26, 2006. The current Annual Service Review was sent to the Council on January 17, 2007. Revisions and a full presentation will be made at the May 15, 2007 meeting.

Program Retention Rate

The HF Brevard Advisory Committee continues to receive information on a regular basis pertaining to the projects' retention rate. Program management, supervisors and Family Support Workers are all aware of the importance of not only enrolling families in the program but also working to keep them engaged as well. HF Brevard has shown improvement in the area of program retention.

Of the 452 families served between July 1, 2005 and June 30, 2006, 197 (22 completed the program, transferred to other sites or aged out of the program) families were closed to services. Therefore, the retention rate for HF Brevard for the fiscal year is 62% and the attrition rate is 38%. Retention is defined as #Open + # Transfer + # Aged out + #

Completed divided by the total number served. When looking at the chart below, it appears that the families closing on MOOSA has decreased while lost contact has increased. It is speculated that many of these families that have been closed due to lost contact have most likely moved from the service area. This FY, there has also been a large increase in the families closing to working and going to school full time. These families are offered flexible scheduling but many decline stating they are just too busy. Due to the increased cost of living, there appears to be more pressure on families to return to work soon after having a baby and often working multiple jobs to make ends meet.

Reasons and frequency for closure for the entire county are as follows:

Closure Reason	Number Closed/Percentage
Parent incarcerated	0 (0%)
Target child died	1 (.5%)
Not Interested	45 (22.8%)
Moved out of Service Area	36 (18.3%)
Completed Program	19 (9.6%)
Work/School Full Time	32 (16.2%)
Vanished/Lost Contact	40 (20.3%)
Child Removed by CPS	6 (3%)
Referred Out	0 (0%)
Transfer to HFF site	4(2.7%)
Other	6 (3%)
Transfer to non-HFF site	1 (.7%)
Child Adopted Out	0 (0%)
Aged Out	3 (1.5%)
None Selected	0 (0%)
Primary Participant Died	1(.5%)
Refusing New FSW	8 (4.1%)

Of the families that closed to the program prior to successful completion, 63 of the families lived in Palm Bay in the south area of the county, representing 36% of the county's closures. In addition, 20% of the participant that closed lived in the Melbourne area of the county, 12% lived in the Central area and 32% lived in the North area of the county. Closure reasons by area show the following:

Area/Closure Reason	Number Closed	Percentage of Closed
North	59	30%
MOOSA	9	15.3%
Not Interested	15	25.4%
Lost Contact	11	18.6%
Completed Program	3	5.1%

Parent School /Working Full Time	14	23.7%
Removed by CPS	3	5.1%
Other	4	6.8%
Central	28	14%
MOOSA	3	10.7%
Not Interested	6	21.4%
Lost Contact	11	39.3%
Completed Program	6	21.4%
Parent School /Working Full Time	1	3.6%
Removed by CPS	0	0%
Aged Out	1	3.6%
South – Melbourne	44	22%
MOOSA	10	22.7%
Not Interested	8	18.2%
Lost Contact	6	13.6%
Completed Program	8	18.2%
Parent School /Working Full Time	3	6.8%
Removed by CPS	0	0%
Aged Out	1	2.3%
Target Child Miscarried Died	1	2.3%
Other	2	4.5%
Refusing New FSW	5	11.4%
South – Palm Bay	66	34%
MOOSA	14	21.2%
Not Interested	16	24.2%
Lost Contact	12	18.2%
Completed Program	2	3%
Parent School /Working Full Time	14	21.2%
Removed by CPS	3	4.5%
Aged Out	1	1.5%
Target Child Miscarried Died	0	0%
Primary Participant Died	1	1.5%
Refusing New FSW	3	4.5%

When looking at the closure reasons per site, the primary focus was on not interested or vanished as these are the two areas which the program can potentially impact. The site with the lowest not interested reason for closure was the Melbourne site. The Central site had the smallest number of closures. These two teams are the smallest of the four teams which obviously results in the smallest team case load. These teams are made up of three FSWs each – five of which have over five years of experience which indicates that many of their families have been engaged in the program for several years.

While the closure reason per site was examined, additional data was reviewed with respect to the demographic characteristic of those who left the program prior to graduation. This analysis focuses on those who vanished or closed due to not interested for the six month period of January 1, 2006 through June 30, 2006.

This is detailed in the chart below N = 41:

FSW	Number (%)	Level at Closure	Number (%)	Race	Number (%)	Education	Number (%)
DB	3 (7%)	Level X	27 (66%)	White	22 (54%)	High school diploma	18 (44%)
BB	1 (2%)	Level 1P	3 (7%)	Black	12 (29%)	No High School Diploma	23 (56%)
RJ	2 (5%)	Level 1	11 (27%)	Hispanic	4 (10%)		
NW	2 (5%)			Other	3 (7%)		
LM	4 (10%)						
LS	5 (12%)						
DC	1 (2%)						
MP	4 (10%)						
ED	5 (12%)						
IJ	2 (5%)						
ML	3 (7%)						
BM	2 (5%)						
MM	5 (12%)						
IT	2 (5%)						

HVC Rate	Number (%)	Pre/Post at Enrollment	Number (%)	Age	Number (%)
0-19%	2 (5%)	Prenatal	25 (61%)	16	1 (2%)
21-30%	5 (12%)	Postnatal	16 (39%)	17	2 (5%)
31-40%	5 (12%)			18	5 (12%)
41-50%	5 (12%)			19	1 (2%)
51-60%	3 (7%)			20	3 (7%)
61-70%	7 (17%)			21	4 (10%)
71-80%	4 (10%)			22	1 (2%)

81-90%	5 (12%)			23	2 (5%)
91-100%	5 (12%)			24	3 (7%)
				25	3 (7%)
				26	3 (7%)
				27	2 (5%)
				29	3 (7%)
				30	2 (5%)
				31	2 (5%)
				32	1 (2%)
				33	1 (2%)
				34	1 (2%)
				35	1 (2%)

In analyzing the data provided in the chart above, it appears that the majority of those who closed due to not interested or vanished were white females between the ages of 20 and 29. Perhaps the most interesting factor is that there did not seem to be difference when looking at those who completed high school and those who did not. Also, the HV completion rate did not appear to have a specific impact. Of those that stayed in the program, the majority were white women at various age levels. Based on the data analysis, HF Brevard seems to be doing a good job of retaining families when the mom is over 30. This represents 55 of our families who stayed in the program with only 8 families in this age group leaving the program. Educational levels were analyzed and there does not appear to be any significant difference between the two groups.

To address the demographic factor impacting retention as noted in the paragraph above, HFB has completed Tier 3 for GGK and are using this as our primary curriculum with families. In addition, there has been an increased focus on moving families to the new level as they are ready and have met the criteria so that we can make sure that the level is appropriate for the family. Levels are reviewed monthly. While these are general retention strategies, they are also helpful with looking to retain families in other age and racial groups due to the GGK curriculum having an increased focus on cultural and family values as well as being more attractive to younger families as they can make their own toys.

Additional analysis was conducted in order to determine trends regarding closures specific to Family Support Workers. The results show that closures seem to have shifted to more closures in the North/Central area (58%) as compared to the Palm Bay area last FY. Based on the chart below, it is interesting to note that the last three FSWs were hired this year and have the highest retention rate and 2 of the three have a high HV completion rate

Family Support Worker	FSW retention rate	HV completion Rate
FSW North DB	65%	56%
FSW North BB	60%	54%

FSW North RJ	73%	76%
FSW North NW	42%	58%
FSW Central LM	72%	86%
FSW Central MM	77%	79%
FSW Central LS	56%	53%
FSW Central MS	32%	95%
FSW Melbourne DC	75%	76%
FSW Melbourne MP	69%	83%
FSW Palm Bay BM	47%	81%
FSW Palm Bay IT	70%	70%
FSW Palm Bay ED	61%	48%
Lisa Thompson	80%	47%
Selidette Gluntz	100%	100%
Iovana Johnson	88%	88%

An analysis of the last service level that families were on at the time of closure for January 2006 through June 2006 yielded the following results at the time of closure:

Level 1	40%
Level 2	0%
Level 3	5%
Level 4	9%
Level X	41%
Level 1P	5%
Level 1E	0%
Level 1SS	0%

As Level 1 has the highest level of closures, there has been an emphasis on reviewing a families' level once a month to ensure that they are on the appropriate level and that we are not keeping families on Level 1 that should be on Level 2 and thus are quitting the program out of boredom. We also want to make sure we are transitioning families to Level X at the appropriate time when warranted.

The program also continues to address issues related to Level X and early closures. Supervisors continue to discuss creative outreach strategies in supervision in order to reduce the number of families on Level X and creative ways to keep families engaged. The Program Manager reviews all cases that are to be closed prior to official closure in the HFF data system in order to offer additional suggestions or assistance regarding opportunities for engagement. Program Supervisors are also contacting each family that has requested closure prior to closure in order to discuss their satisfaction with services and to attempt to reengage the family if at all possible.

If a family is dissatisfied, then a new FSW may be offered if it is an issue of the family not wanting that particular FSW in their home. If it is an issue of timing of the home visit then that can be addressed with the FSW in supervision.

Personnel Turnover

During the fiscal year, there were six people that left their positions with the HF Brevard program. Staff changes included the following:

Position Title	Number that Vacated Position	Reasons for Leaving
FSW	4	One was terminated, two resigned, and one was promoted
Assistant Program Manager	1	Moved from area
FAW	1	Promoted to Supervisor

Of the six staff turnovers, three were promotions or in the case of the assistant program manager she left the area. Of the three FSWs that were not promoted, one was terminated, one resigned, and one was with the program for one day. Based on the staff vacancy reasons indicated above, the only negative retention issue was the three FSWS that were terminated or resigned. The resignations would have been terminations if the resignations had not been submitted. HF Brevard plans to continue to create a supportive environment for all staff. It is important to note that the majority of the direct service staff have been with the program three or more years.

Cultural Information

Of the 452 families served during the fiscal year, the following is a breakdown of the demographic characteristics of those served:

232 (51.3%) are White Non-Hispanic

121 (26.8%) are Black Non-Hispanic

77 (17%) are Hispanic/Latino

22 (4.8%) are Other to include multi/bi-racial, Native American and Asian or Pacific Islander

The majority of the Hispanic/ Latino families served by HF Brevard are Spanish speaking only. The remaining families served by the program speak English. In comparing the family demographics to the general population, HF Brevard has a higher percentage of Black and Hispanic families than found in the general population.

HFB continues to serve a wide range of ethnicities within the participants. Some of them include: Anglo/Western European, African American, Mexican, Guatemalan, Caribbean/West Indian, Puerto Rican, Asian Indian and Laotian. When compared to the

characteristics of Brevard County, HF Brevard is serving a higher percentage of African American participants than the county figures and a lower percentage of Caucasians. This could be the result of more African Americans open to home visiting services.

Service Planning Process

Self-reported demographic data of HFB staff indicates that of those that provided services during FY 2005 - 2006:

53.6% are White
21.4% are Black
25% are Hispanic

Seven of the HFB staff is bilingual, speaking both English and Spanish. Based on having several bilingual staff, there has not been a need for HFB to retain outside translation services. Staff demographics are highly correlated with family demographics. The only absolute matches made when assigning families to Family Support Workers pertains to language. Families and staff in Brevard are not matched based on any other racial or ethnic factor.

Summary

The HF project in Brevard County continues to strive to provide the most supportive, educational and culturally competent services to families. The program continues and has made progress in addressing issues related to screening, assessment and enrollment in order to increase the number of families able to be served. The program feels that the staff is motivated to make any necessary changes and looks forward to any input provided in order to assist with programmatic improvements.