



FSSD CQI Newsletter:

Family Retention

JUNE 2015

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The Continuous Quality Improvement (CQI) team is a partnership between MIECHV supervisors and the MIECHV Quality Assurance Coordinator. The CQI team focuses on data-driven quality improvement initiatives for home visiting programs in Iowa.

Data at a Glance

Iowa FSSD programs have served **14,360** families since beginning to use the REDCap system in 2013. **5,827** of these families have been exited, while **8,533** are currently being served.

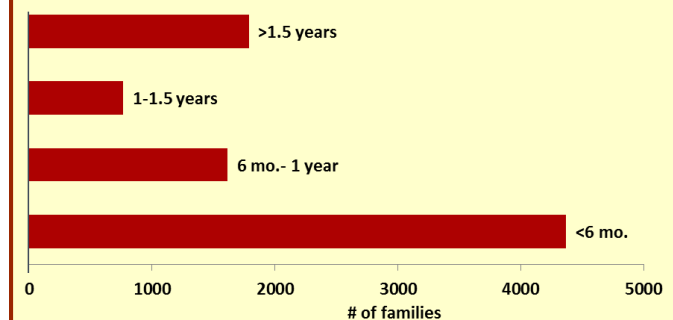
some families move back and forth between states depending on which benefits they currently need/qualify for and what different states offer.



Barriers to retention that some programs are experiencing include:

- ◇ Community/policy issues: in one county, funding cuts to a low-income housing program caused many families to move.
- ◇ Home visitor turn-over.
- ◇ State benefit differences:

Time in Program (for exited families)



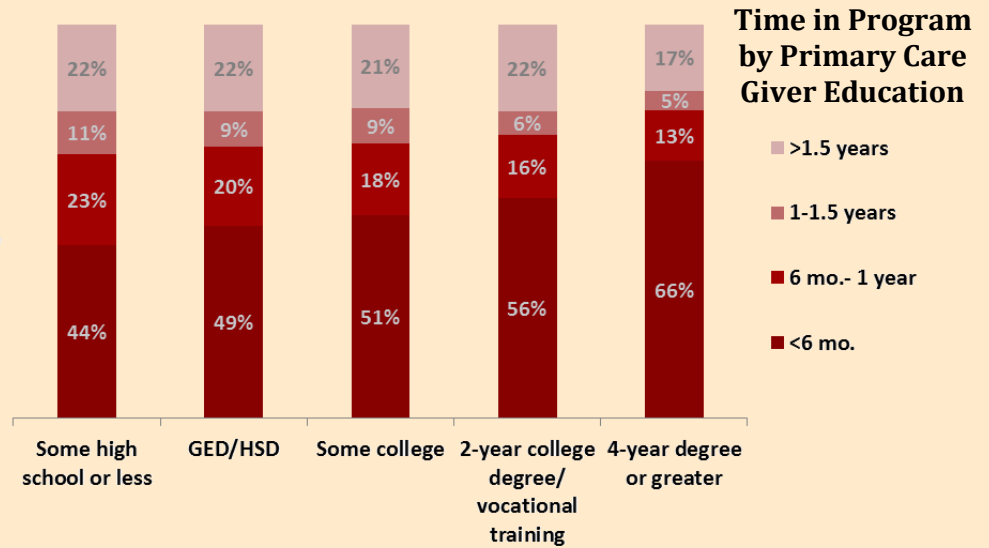
Data Source: FSSD REDCap. All data in this report exported 05.21.15.

The **Top 5 Reasons** families discontinued services were:

1. Family completed program/child aged out (41%)
2. No contact/could not locate (19%)
3. Family moved out of service area (13%)
4. Family requested exit/no longer interested (11%)
5. Family is too busy (6%)

Which of these do programs have some control over?

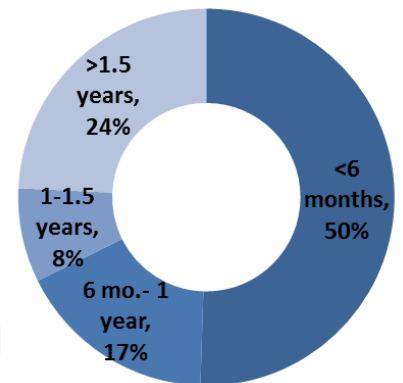
Data at a Glance: Education



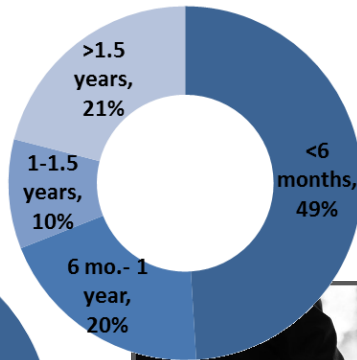
Data at a Glance: Marital Status

FSSD data reflects
3,518 married, **2,625**
 single, **1,791** partnered,
 and **566**
 separated/divorced
 primary care givers.

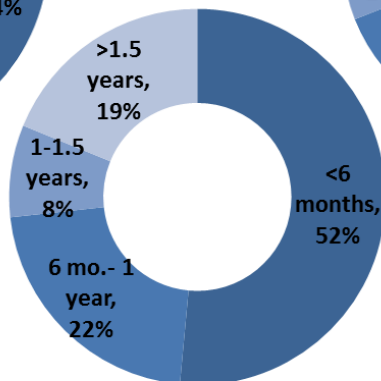
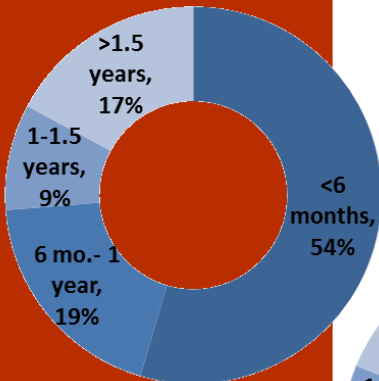
Married



Partnered



Single



Separated/Divorced

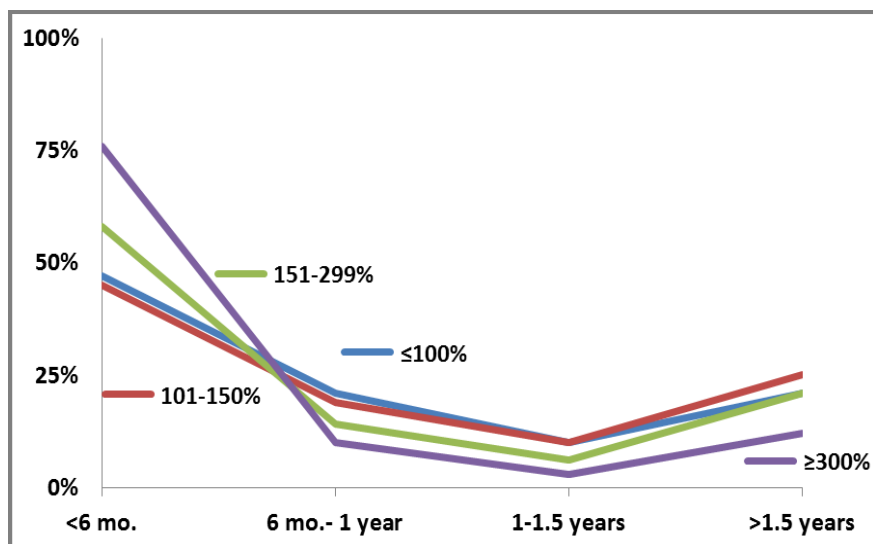




Income
(measured by
the percent of
federal
poverty level
reported at

enrollment) has a significant impact on the time a family spends in a program before exiting. Since families in poverty have less access to resources, it is encouraging that these families have the highest retention rates.

Data at a Glance: Income



n= 8,390

Data at a Glance: Race

Time in Program by PCG Race	White	African American or Black	Asian	Multiracial
<6 mo.	51%	60%	34%	62%
6 mo.- 1 year	18%	18%	26%	19%
1-1.5 years	8%	9%	18%	4%
>1.5 years	22%	12%	22%	15%
Total	6813	833	512	99
69 Native American/Alaskan Native and 16 Native Hawaiian/Pacific Islander. Scores taken from Initial LSPs.				

What other factors have you seen affect family retention and engagement?



Spotlight: Motivational Interviewing

Motivational Interviewing (MI) is a client-centered method for enhancing intrinsic motivation to change. MI is goal-oriented and helps clients to explore and resolve ambivalence.

Spirit of MI:

- ◆ Collaboration: a partnership that honors the client's knowledge & perceptions.
- ◆ Evocation: drawing out resources, strengths, reasons for change and intrinsic motivation that already exists in the client.
- ◆ Autonomy: affirms the

client's right and capacity to choose whether and when to change.

General Principles:

- ◆ Express empathy



- ◆ Develop discrepancies
- ◆ Roll with resistance
- ◆ Support self-efficacy (note client strengths, affirm

successes in making other previous changes, etc.)

A Few Methods:

- ◆ Open questions
- ◆ Reflective listening
 - ◆ Affirming
 - ◆ Methods for evoking change talk: eliciting from the client discussions of personal values, goals and strengths; "good and not so good" ideas about changing; looking forward or backward to compare life with or without changes.

Resources:

- ◆ <http://www.motivationalinterviewing.org/>
- ◆ http://www.nova.edu/gsc/forms/mi_rationale_techniques.pdf

What can YOUR program do to increase family engagement & retention?

Programs: ID characteristics of families who quit the program early. 1 tactic: interview both those who exited early & those who successfully completed services (then use this data!).

Programs: Train workers on strength-based assessments and practices.

Programs: Seek to understand cultural and community norms around parenting and service utilization.

Programs: When possible, include mental health expert on team to assist with high risk families.

Supervisors: Use reflective supervision, observation of home visits, and open dialogue with staff about where they're struggling.

Home Visitors: Work with family to plan for key *participant* goals.

Home Visitors: Involve other caregivers in the home visit (i.e. fathers, grandparents) as appropriate and possible.