COMMUNITY COLLABORATION TO REDUCE INFANT MORTALITY IN NEW YORK CITY: A CITYWIDE EVALUATION PROCESS

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PRESENTER DISCLOSURES

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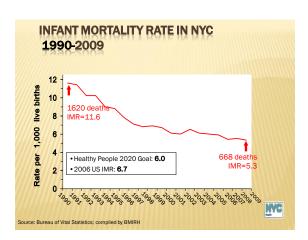
The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

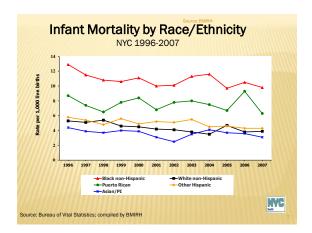
"No relationships to disclose"

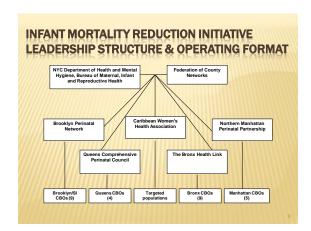
IMRI PROJECT GOALS

- ★ To reduce disparities in the Infant Mortality Rate (IMR) in New York City in communities with disproportionately high rates
- ★ To improve birth outcomes for infants in communities with high IMR









EVALUATION PROCESS TIMELINE

- × FY 2002: IMRI Funding Allocated -\$5.0 Million and Core Interventions Implemented through RPCBs & CBOs
- FY 2005: Evaluation Process discussions BMIRH, RPCBs & FCN
- FY 2006-2007: Regional and FCN Evaluations & Revised & Standardize Data Collection Forms
- FY 2008: Pilot Revised Forms in 8 CBOs, Convene Core Interventions Working Groups, Amend revised forms & Develop Trainings; Select Citywide Evaluator
- FY2009-2011: Citywide Capacity-Building Core Interventions Trainings, Implement Citywide Evaluation Process

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METHODS

- A Assessment/redirection of FCN's citywide staff training & capacity building services to IMRI agencies on:
 - 1. Enhanced training effective Best Practices re Core Interventions, com-munity education.
 - Proper completion of data collection forms and timely submission to citywide evaluator
- B. Ongoing monitoring of Citywide Evaluation
- More focused coordination of: IMRI Evaluation Oversight Group,
- 2. Strategic training & education offerings to improve agencies performance
- Management of overall citywide evaluation efforts and timely submission of any and all Evaluation Reports

TRAINING	Pre-Post	2009 Attended	2010 Attended
Short Term Training Goals			
Professional Development Trainings* -14		168	195
Community Education Training (2009) re Breastfeeding to increase knowledge/practice	Pre=60.4% Post=84%	21	
Training (2010) for Health/Peer Education-6	Post= 70%	22	23
Training (2010) for Safe Sleep – 2 sessions	Post =70%	19	17
Mid Term Capacity Building Goals			
Implementation of any agency change?		81%	100%
Implementation of Best Practices		10%	86%
Use of Data Collection forms		80%	100%
No change		10%	0%
Long Term Outcomes - Impact			
Changes sustained more than 6 months		76%	95%
Evaluation of changes, Y=yes or N=No *Training re evaluation and core interventions		N=90%	Y= 100%

RESULTS: IMPROVED SERVICE QUALITY 2009 - 2010

Outreach Number of People Reached – declined from 5,110 in 2009 To: 1,234 Percent of people identified with needs increased from 43% to: 84% Among the 84%: those with basic needs: food, shelter, clothing 2/3 those with health needs ½ Percentage of people receiving referrals increased from 15% to 84% Percentage of people receiving services increased from 9% to 62% Case Management # of people receiving case management services 5% from 381 to 401 # of Needs identified increased from 2.2 in 2009 to: 2.6 Percent of goals achieved increased from 36% to 59% Education Workshops increased (over 2009 by 1/3) from 8.210 11.198	Core Interventions Trainings - Capacity Building to 35 Agencies	Results
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PROGRAM OUTCOMES FOR 2010 Outreach and Referrals Provided: Number of Clients reached 1,590 Number of Clients who received referrals 1,397 (88%) Clients who received services 1,064 (67%) Community Educational Workshops held People attended workshops 7,946 Case Management: Number of persons served in 2010 347 Number of goals set by average Client 2.7 Percent clients who set goals to meet basic needs 36% 25% Percent clients who set health goals Percent clients who set goals for children's services 29% Percent of goals achieved 53% Percent of clients who received some goals Percent of clients who achieved all their goals 31%

CONCLUSION

- × FY 2009-2010:
 - + FCN made changes in its training and capacity building programs to prepare IMRI agencies to fully embrace and become involved in citywide evaluation.
 - + FCN had succeeded in not only hiring a citywide evaluator but also in bringing all IMRI agencies into the evaluation process.
- * To accomplish its goals, FCN:
 - + Intensified its offerings of citywide trainings
 - Provided strategic capacity building education programs to all IMRI agencies
 - + Rigorously coordinated the activities of the Citywide Evaluation Oversight Group.

ACKNOWLEDGEMENTS

- 1. City Council, City of New York
- 2. Brooklyn Perinatal Network, Inc.
- 3. Caribbean Women's Health Association
- 4. Northern Manhattan Perinatal Partnership
- 5. Queens Comprehensive Perinatal Council
- 6. The Bronx Health Link
- 7. 35 IMRI Funded CBOs
- 8. Bureau of Maternal, Infant and Reproductive Health, NYC Department of Health and Mental Hygiene
- 9. Philliber Research Associates

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