



Board of Health Meeting
 Tuesday, May 20, 2025
 13307 Miami Lane, Caldwell, ID 83607

Public comments specific to an agenda item for the May 20, 2025 Board of Health meeting can be submitted [here](#) or by mail to: SWDH Board of Health, Attn: Administration Office, 13307 Miami Lane, Caldwell, ID, 83607. The period to submit public comments will close at 10:00 a.m. on Monday, May 19, 2025. The meeting will be available through live streaming on [the SWDH You Tube channel](#).

Agenda – Amended*

<u>A = Board Action Required</u>		<u>G =Guidance</u>	<u>I = Information item</u>
9:20	A	Call Meeting to Order	Chairman Kelly Aberasturi
9:21		Pledge of Allegiance	
9:23		Roll Call	Chairman Kelly Aberasturi
9:24	A	Call for changes to agenda; vote to approve agenda	Chairman Kelly Aberasturi
9:25		In-person public comment	
9:30		Executive Session Pursuant to Idaho Code 742-206(b)	
9:45	A	Action taken as a result of Executive Session	
9:50	I	Introduction of new employees	Division Administrators
10:00	A	Approval of April 2025 meeting minutes	Chairman Kelly Aberasturi
10:02	I	March 2025 Monthly Expenditure and Revenue Report	Aaron Howard
10:15	A	Appointment of Board of Health Physician Representative	Kelly Aberasturi
10:25	I	Foster Care Trends in District 3	Anna Briggs
10:45		Break	
11:00	I	Home Visiting Programs Overview	Patty Kennings, Adriana Villamil
11:30	A	Idaho Association of District Boards of Health (IADBH) Agenda Input	Nikki Zogg
11:45		Directors Report	
		<ul style="list-style-type: none"> • SWDH Staff and Board Finance Workgroup update • Board of Health term expirations <ul style="list-style-type: none"> ○ Commissioner Brooks ○ Commissioner Aberasturi ○ Commissioner Harberd • NACCHO Model Practice Award 	
11:55	I	Future Agenda Items	
12:00		Adjourn	

NEXT MEETING: Tuesday, June 24, 2025 – 9:00 a.m.

***Agenda has been amended to move Executive Session to the beginning of the agenda. Time slots have been adjusted to accommodate this shift.**



BOARD OF HEALTH MEETING MINUTES
Tuesday, April 22, 2025

BOARD MEMBERS:

Jennifer Riebe, Commissioner, Payette County – present
Jim Harberd, Commissioner, Washington County – present
Zach Brooks, Commissioner, Canyon County – present
Kelly Aberasturi, Commissioner, Owyhee County – present
Viki Purdy, Commissioner, Adams County – present via Microsoft Teams
John Tribble, MD, Physician Representative – present via Microsoft Teams
Bill Buttici, Commissioner, Gem County – present

STAFF MEMBERS:

In person: Nikki Zogg, Katrina Williams, Don Lee, Beth Kriete, Aaron Howard, Ben Shatto, Jody Waddy

Virtual: Colton Osborne

GUESTS: Abbey Erquiaga, Jace Perry

CALL THE MEETING TO ORDER

Chairman called the meeting to order at 9:01 a.m.

PLEDGE OF ALLEGIANCE

Meeting attendees participated in the pledge of allegiance.

ROLL CALL

Chairman Aberasturi – present; Dr. John Tribble – present via Microsoft Teams; Commissioner Purdy – present via Microsoft Teams; Commissioner Harberd – present; Vice Chairman Brooks – present; Commissioner Riebe – present; Commissioner Buttici – present.

REQUEST FOR ADDITIONAL AGENDA ITEMS AND APPROVAL OF AGENDA

Chairman Kelly Aberasturi asked for additional agenda items. Board members had no additional agenda items or changes to the agenda.

MOTION: Commissioner Riebe made a motion to approve the agenda as presented. Commissioner Buttici seconded the motion. All in favor; motion passes.

IN-PERSON PUBLIC COMMENT

No public comment provided in person.

INTRODUCTION OF NEW EMPLOYEES

No new employees were introduced.

APPROVAL OF MARCH 2025 MEETING MINUTES

Board members reviewed meeting minutes from the March 18, 2025 Board of Health meeting.

MOTION: Commissioner Riebe made a motion to approve the March 18, 2025 meeting minutes as corrected. Commissioner Butticci seconded the motion. All in favor; motion passes.

FEBRUARY 2025 EXPENDITURE AND REVENUE REPORT

Aaron Howard, Chief Financial Officer, presented the February 2025 Expenditure and Revenue Report. Revenue and expenditure reports reflect delays in issuing billings due to finance department staffing vacancies and turnover. March expenditure and revenue reports are anticipated to reflect that billings have resumed and revenue is coming in as expected.

The crisis center aggregate budget may require a change in appropriations as staff work through federal rules impacting the funding. Board members briefly discussed the long term outlook for funding for crisis centers.

In response to a Board member question from last month's meeting about the percentage of SWDH funding passing through SWDH as Trustee and Benefit, Aaron informed Board members the percentage is about 18%.

EMPLOYEE COMPENSATION REQUEST

Jody Waddy, Human Resources Specialist, presented the Fiscal Year 2026 Employee Change in Compensation Request which includes a 3% cost of living adjustment (COLA) to be implemented June 8, 2025. Jody also highlighted the SWDH retention rate, which at 78% is higher than last year and is consistent with healthcare industry trends. Our recruiting market does not show notable changes. Currently, SWDH has 114 budgeted positions and currently has 12 vacant positions. The average tenure of SWDH staff has increased to 5.53 years.

Commissioner Purdy noted that most Adams County staff did not receive a raise of any kind. A few years ago, Adams County approved very good raises for law enforcement and road and bridge staff and it did not seem to impact retention.

MOTION: Commissioner Butticci made a motion to approve the Change in Employee Compensation plan as presented including the 3% cost of living adjustment (COLA) effective June 8 as requested. Commissioner Riebe seconded the motion. Dr. Tribble and Commissioner Purdy voted no. Motion passes with a vote of 5-2.

COUNTY CONTRIBUTION REQUEST

Aaron Howard, presented the Fiscal Year 2026 County Contribution Request which represents an approximate \$70,000 increase from last year. Aaron responded to Board member questions regarding how compensation request costs can exceed the increase in county contributions by explaining that the amount of the employee compensation increase will cost about \$176,000 which will come from county contributions and also grant funding.

Commissioner Brooks noted that as the representative for Canyon County, largest contributor of county contributions, he does not support the increase in county contributions. He continues to object to

Canyon County being responsible for 77.2% of the county contributions but having only one vote regarding the budget.

MOTION: Commissioner Butticci made a motion to approve the Fiscal Year 2026 county contributions. Commissioner Riebe seconded the motion. Commissioner Brooks and Commissioner Purdy voted no. Motion passes with a vote of 5-2.

FISCAL YEAR 2026 BUDGET PROPOSAL REVIEW AND APPROVAL

Aaron Howard provided an overview of the Fiscal Year 2026 Proposed Budget. He responded to questions from last month's meeting by informing Board members that 18% of trustee and benefits is pass through dollars. In addition, 1% of a COLA for SWDH staff is equal to roughly \$59,000.

Nikki and Aaron will present this Fiscal Year 2026 Proposed Budget to the six counties' Boards of County Commissioners beginning Monday, 5/4/2025.

MOTION: Commissioner Butticci made a motion to approve the fiscal year 2026 budget request as presented. Commissioner Riebe seconded the motion. Dr. Tribble and Commissioner Purdy voted no. Motion passes with a vote of 5-2.

YouthROC OVERVIEW

Savannah Nalder, YouthROC Program Manager, shared an overview of the Youth Resource Opportunity Collaborative (YouthROC) Program. The program helps ensure connections to the resources and services the youth and family need to be successful as well as an evidence-based process to assess and assist the goals to foster that success for the youth and for the family unit.

Savannah shared that District 3 represents more than 20% of the youth statewide placed in foster care. Since starting in February 2023, nearly 715 youth have been referred into the program.

Dr. Tribble asked what curriculum or system is being used for parenting instruction and counseling? Savannah will get that from the providers and provide it to him.

CHILDHOOD MORBIDITY AND MORTALITY TRENDS FOLLOW UP

Dr. Anna Briggs, SWDH Research Analyst, Principal, provided follow up information from her February presentation.

CLEARWATER FINANCIAL SITUATION ANALYSIS PROJECT OVERVIEW

Clearwater Financial presented an overview of the situation analysis project they are working on for SWDH to help identify long-range facility and service priorities. The final product will include implementation processes, priorities, and a funding plan.

EXECUTIVE COUNCIL REPORT

Commissioner Purdy shared an Executive Council Report. The Executive Council is comprised of a member from each Board of Health and the health district directors. The state Idaho Association of District Boards of Health (IADBH) meeting is a function of the Executive Council. The meeting is mostly a learning environment with speakers that speak to topics impacting health districts and citizens. Commissioner Purdy and Nikki will work together to coordinate the meeting and agenda topics.

POOL INSPECTION DISCUSSION

Jeff Buckingham, SWDH Program Manager, shared benefits of encouraging regulatory authority over pools after the change to statute removes the requirement effective July 1, 2025. Non-regulated pools have been associated with a higher instance of waterborne disease outbreaks over the last five years. Jeff and other team members are meeting with local government entities to discuss local oversight through enacting local ordinances. Jeff explained that outbreaks associated with waterborne illness would still be investigated by SWDH epidemiologists.

Jeff and Nikki will keep Board members updated on conversations with cities and bring back any fee setting action to Board of Health members.

DIRECTORS REPORT

Proposed Fall Idaho Association of District Boards of Health (IADBH) Meeting Dates

Proposed meeting dates for the fall IADBH conference are October 15-17 in Boise.

Finance Workgroup

Nikki asked the Board of Health Chairman, Vice Chairman and Commissioner Riebe to join she and Aaron to review some of the SWDH financial policies and talk through operating reserve, board committed funds, and how to measure return on investment. These meetings are being scheduled.

Fiscal Year 2026 Budget Committee Meeting Proxy Forms

Katrina will send budget committee meeting invitations and proxy forms to each county's clerk.

Board of Health Term Expirations

Several board members have terms expiring this year and Katrina will send term renewal letters to county clerks.

Pre-Prosecution Diversion (PPD) Facilities

Nikki shared that the location previously identified to house the pre-prosecution diversion team did not work out. Another location in Caldwell that is a smaller space, substantially less money, and also a better fit for co-location has been identified and the lease agreement will come to the Board for approval at a future meeting. Nikki asked if the board's preference would be to hold a special meeting to approve that lease or would the board approve Nikki to sign? Nikki asked for guidance. Board members prefer a special meeting if needed to approve the lease if it is ready prior to May 20.

EXECUTIVE SESSION PURSUANT TO IDAHO CODE 74-206(b)

Pursuant to Idaho Code 74-206(b) Board members entered Executive Session. Roll call taken.

ACTION FOLLOWING EXECUTIVE SESSION

No action was taken following executive session.

There being no further business, the meeting adjourned at 12:53 p.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Kelly Aberasturi
Chairman

Date: May 20, 2025



SOUTHWEST DISTRICT HEALTH

REVENUES & EXPENDITURE REPORT FOR FY2025

Cash Basis

March 2025

Target **74.9%**

Fund Balances		
	FY Beginning	March 2025 Ending
General Operating Fund	\$ 636,900	\$ 1,439,540
LGIP Operating	\$ 6,938,818	\$ 5,624,659
LGIP Vehicle Replacement	\$ 108,497	\$ 113,390
LGIP Capital	\$ 1,299,174	\$ 1,299,174
Total	\$ 8,983,390	\$ 8,476,763

Income Statement Information			
	YTD	Month	
Net Revenue:	\$ 8,589,160	\$ 645,789	
Expenditures:	\$ (8,614,088)	\$ (1,043,954)	
Net Income:	\$ (24,928)	\$ (398,166)	

District Activity - Fund 29000

Revenue								
	Office of the Director	Clinic Services	Env & Community Health	District Operations	Total	YTD	Total Budget	Percent Budget to Actual
County Contributions	\$ 223,208	\$ -	\$ -	\$ -	\$ 223,208	\$ 2,082,219	\$ 3,122,831	67%
Fees	\$ -	\$ 89,134	\$ 218,945	\$ -	\$ 308,079	\$ 1,796,189	\$ 1,704,841	105%
Contract Revenue	\$ -	\$ 45,733	\$ 56,641	\$ 12,128	\$ 114,502	\$ 4,081,542	\$ 6,257,743	65%
Sale of Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0%
Interest	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 250,004	\$ 337,850	74%
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 379,206	\$ 1,656,666	23%
Monthly Revenue	\$ 223,208	\$ 134,867	\$ 275,585	\$ 12,128	\$ 645,789	\$ 8,589,160	\$ 13,079,931	66%
Year-to-Date Revenue	\$ 2,333,141	\$ 2,199,828	\$ 3,683,261	\$ 372,930	\$ 8,589,160	DIRECT BUDGET		

Expenditures								
	Office of the Director	Clinic Services	Env & Community Health	District Operations	Total	YTD	Total Budget <small>*Shift personnel savings down*</small>	Percent Budget to Actual
Personnel	\$ 26,390	\$ 300,647	\$ 219,425	\$ 124,392	\$ 670,854	\$ 6,546,970	\$ 9,324,880	70%
Operating	\$ 5,077	\$ 115,995	\$ 142,308	\$ 106,738	\$ 370,117	\$ 2,045,365	\$ 2,403,122	85%
Capital Outlay	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,455	\$ 80,000	3%
Trustee & Benefits	\$ -	\$ -	\$ 2,983	\$ -	\$ 2,983	\$ 19,297	\$ 1,271,929	2%
Monthly Expenditures	\$ 31,467	\$ 416,642	\$ 364,717	\$ 231,129	\$ 1,043,954	\$ 8,614,088	\$ 13,079,931	66%
Year-to-Date Expenditures	\$ 320,093	\$ 3,721,545	\$ 2,801,404	\$ 1,771,045	\$ 8,614,087	DIRECT BUDGET		

SOUTHWEST DISTRICT HEALTH - ADULT CRISIS CENTER ACTIVITY

March 2025

REVENUES & EXPENDITURE REPORT FOR FY2025

Cash Basis

Target **74.9%**



Income Statement Information

	YTD	Month
Net Revenue: \$	1,277,546	\$ 250,000
Expenditures: \$	(952,600)	\$ (122,615)
Net Income: \$	324,946	\$ 127,385

Adult Crisis Activity - Fund 29001

Revenue				
	Crisis Center	YTD	Total Budget	Percent Budget to Actual
Contract Revenue	\$ 250,000	\$ 1,277,546	\$ 1,020,000	125%
Monthly Revenue	\$ 250,000	\$ 1,277,546	\$ 1,020,000	125%
DIRECT BUDGET				

Expenditures				
	Crisis Center	YTD	Total Budget	Percent Budget to Actual
Personnel	\$ 1,548	\$ 15,564	\$ 18,870	82%
Operating	\$ 121,067	\$ 937,036	\$ 77,495	1209%
Capital Outlay	\$ -	\$ -	\$ -	0%
Trustee & Benefits	\$ -	\$ -	\$ 923,635	0%
Monthly Expenditures	\$ 122,615	\$ 952,600	\$ 1,020,000	93%
DIRECT BUDGET				

94% (Including T&B Budget)

SOUTHWEST DISTRICT HEALTH - YOUTH CRISIS CENTER ACTIVITY

March 2025

REVENUES & EXPENDITURE REPORT FOR FY2025

Cash Basis

Target **74.9%**



Income Statement Information

	YTD	Month
Restricted Funds:	\$ 1,336,691	\$ -
Net Revenues:	\$ 910,650	\$ 250,000
Expenditures:	\$ (1,921,107)	\$ (172,106)
Net Income:	\$ 326,234	\$ 77,894

Youth Crisis Activity - Fund 29002

Revenue				
	Crisis Center	YTD	Total Budget	Percent Budget to Actual
Carry Over Restricted	\$ -	\$ 1,336,691	\$ 1,336,691	100%
Contract Revenue	\$ 250,000	\$ 910,650	\$ 355,750	256%
Monthly Revenue	\$ 250,000	\$ 2,247,341	\$ 1,692,441	133%
DIRECT BUDGET				

Expenditures				
	Crisis Center	YTD	Total Budget	Percent Budget to Actual
Personnel	\$ 10,463	\$ 112,476	\$ 221,775	51%
Operating	\$ 129,630	\$ 861,080	\$ 717,973	120%
Capital Outlay	\$ -	\$ 658,254	\$ -	0%
Trustee & Benefits	\$ 32,013	\$ 289,297	\$ 752,693	38%
Monthly Expenditures	\$ 172,106	\$ 1,921,107	\$ 1,692,441	114%
DIRECT BUDGET				

81% (Including \$350,000 T&B Budget)

72% (Excluding \$350,000 T&B Budget)



Foster Care in SWDH

Dr. Anna Briggs
Principal Research Analyst

A common goal:

Reduce the number of children entering the foster care system

What can SWDH do to achieve this goal?

What is SWDH already doing to achieve this goal?

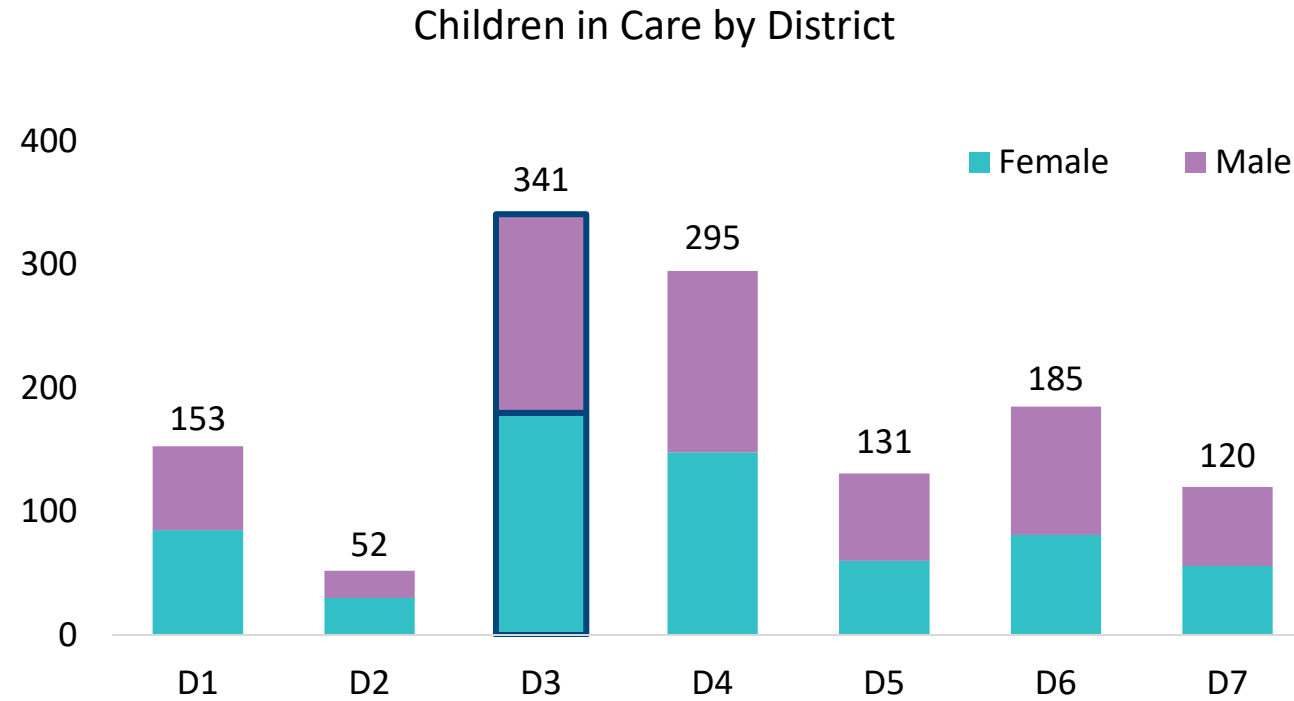


Topics

- D3 Children in Foster Care
- SWDH Foster Care Children and Families Served
- Division WIG measures

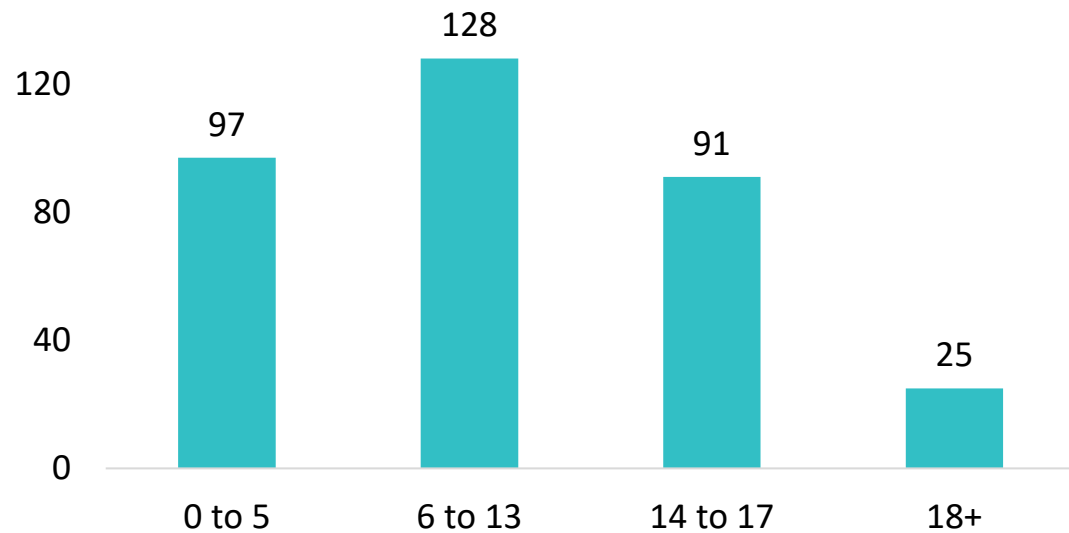
D3 Children in Foster Care

4 May 2025 Foster Care Children Counts

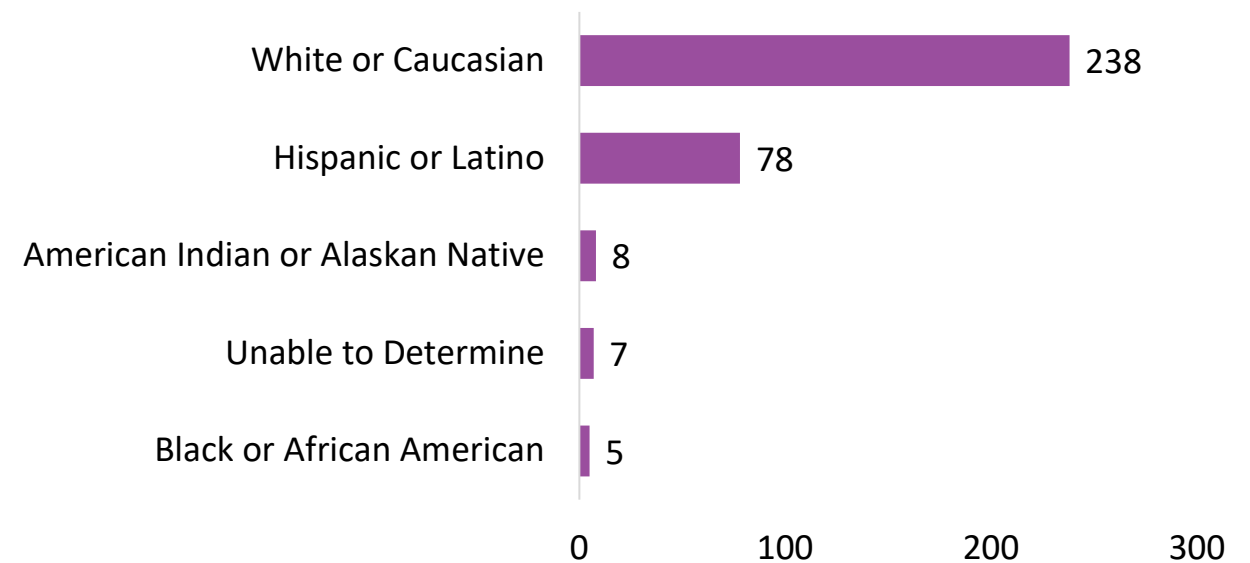


4 May 2025 Foster Care Children Counts

D3 Children in Care by Age

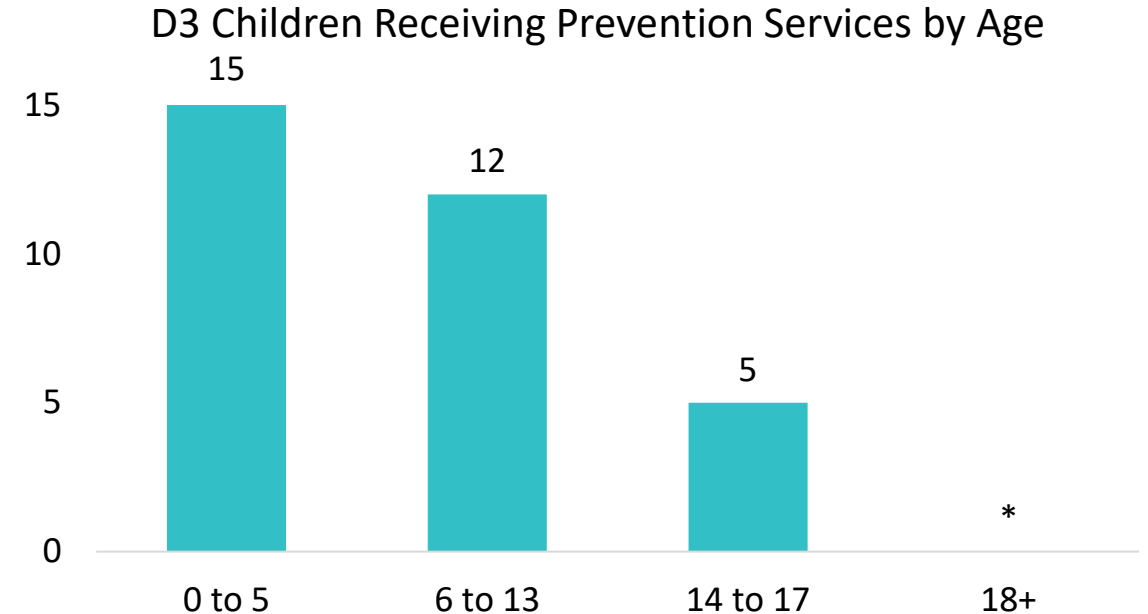
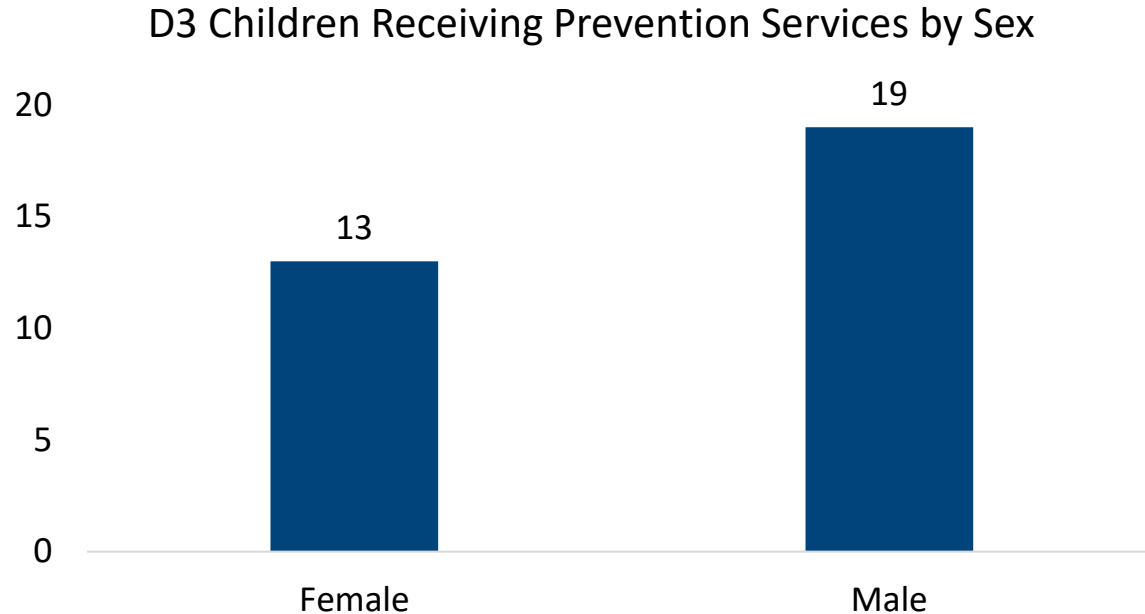


District 3 Children in Care by Race/Ethnicity



4 May 2025 Foster Care Prevention Services

- 32 Children in D3 Receiving Prevention Services



* Fewer than 5

Foster Care – D3 Top Reasons for Removal in Q1 & Q2

- Neglect (includes educational and medical neglect)
- Caretaker Substance Use
- Physical Abuse
- Incarceration of Caretaker
- Unstable Home Environment

Summary

- D3 has the highest counts of children in foster care
- Only 32 children are receiving prevention services to keep them out of the foster care system
 - The majority are under the age of 13
- SWDH has programs to help with some top home removal reasons

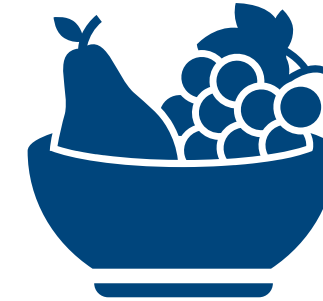
SWDH Foster Care Children and Families Served



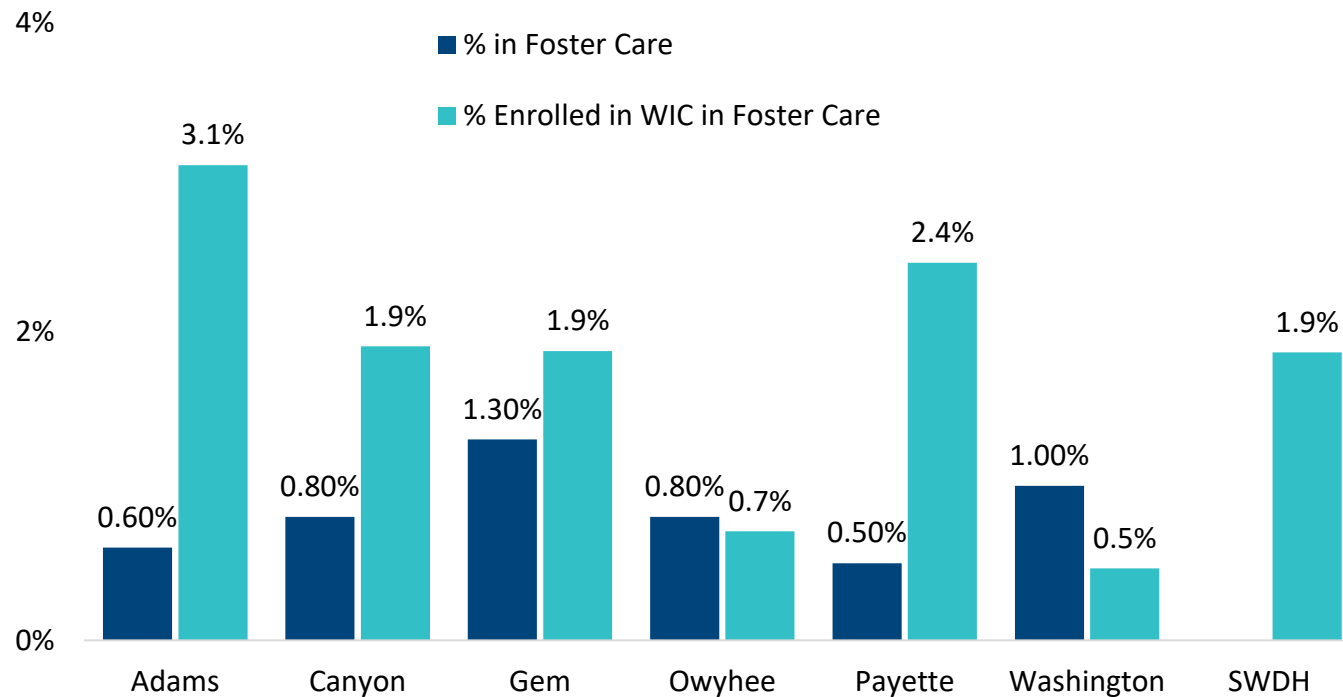
9%

of clients seen by SWDH's
Behavioral Health Clinician have
contact with the foster care system

D3 Children Enrolled in WIC



D3 Children Ages 0 to 5 years old, 2024



7,403 Children in D3 enrolled in WIC
1.9% or **138** were in foster care in 2024

Parents as Teachers



10% of the 93 children served by PAT were in foster care in FY 2024

6% of the 118 children served by PAT were in foster care from 1 July 2024 to 13 May 2025.

Idaho Approved Evidence Based Programs

- Parents as Teachers
- Nurse Family Partnership
- Motivational Interviewing
- Home Builders
- Familias Unidas
- Parent Child Interaction Therapy
- Brief Strategic Family Therapy

SWDH Prevention Services to Avoid Child Removal

- Nurse Family Partnership
- Parents as Teachers
- Pre-Prosecution Diversion Program
- Safe Teen Assessment Center/ YouthROC
- Crisis Centers
- Child Care Inspections
- Nuisance complaints
- Clinic Services

District WIG Measures

- Decrease the number of children entering foster care by 10% by July 2026.
 - Increase access to behavioral health counseling
 - Increase referrals to engage with WIC, home visiting programs (Parents as Teachers and Nurse Family Partnerships), Safe Teen Assessment Center/YouthROC, Pre-Prosecution Diversion Program, Crisis Centers, Child Care Inspections, Nuisance complaints, Clinic Services
 - Strengthen families by connecting them to local providers, services, information, and resources by increasing our reach

SWDH Division Goals to Support WIG

Family and Clinic Services

- Raise awareness of HOPE (Healthy Outcomes from Positive Experiences) through staff presentation. HOPE is a new way of seeing and talking about experiences that support children's growth and development into healthy, resilient adults.
- FCS Supervisors will identify the barriers that keep us from serving the clients who walk through our door, and each quarter we will address and resolve a different barrier.
- Reduce number of days between initial contact and enrollment in WIC by foster families to 7 days or less.

SWDH Division Goals to Support WIG

Environmental and Community Health Services

- Provide education and prevention messaging to parents about youth risk and protective factors influencing health.
- Work with Idaho Foodbank to identify food pantries that can benefit from SWDH annual food donation.
- Provide information on the Idaho Home Visiting and WIC Programs at all licensed childcare facilities and family-based play center fun zones that require a food inspection in D3 by July 2026, including distribution of brochures to each facility.

Summary

- 9% of clients served by behavioral health clinician are in foster care
- In 2024, 1.9% or 138 children enrolled in WIC were in foster care
- In 2024, 10% of the 93 children served by PAT were in foster
- SWDH currently has evidence-based programs to help prevent child removal and entry to foster care
- SWDH Divisions are making goals to support the WIG

References

- Idaho Department of Health and Welfare; Thomas, R. (2025). *Monthly Foster Care Stats*.
- Idaho Department of Health and Welfare; Thomas, R. (2025). *Monthly Prevention Services Stats*.
- Idaho Department of Health and Welfare; Thomas, R. (2025). *Quarterly Reasons for Removal*.

SWDH Nurse-Family Partnership (NFP)

NFP Vision: *A future where all children are healthy, families thrive, communities prosper, and the cycle of poverty is broken.*

The Nurse Family Partnership program at Southwest District Health kicked off in 2015 by serving Canyon County. The program has grown county by county since then with Owyhee added in 2021, Adams in 2022, and Washington, Payette, and Gem in 2024. We are proud to share that the NFP team has served at least one client from each county as we have amplified efforts to connect with families across the entire region to grow participation.

**Women and babies
served from 2020 to 2025**



340



230

NFP Program Goals

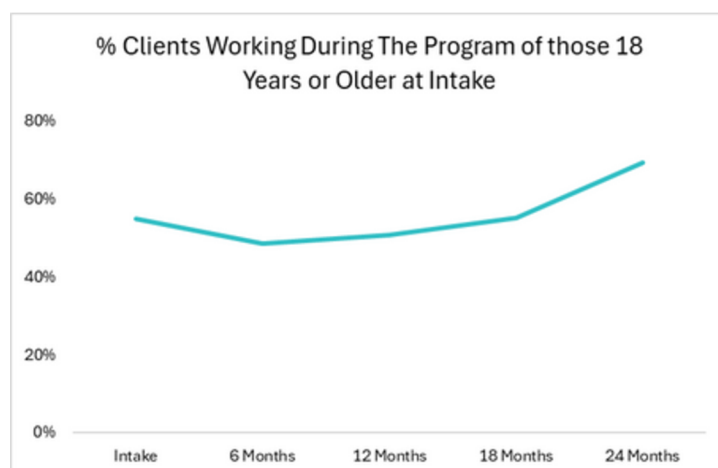
- Improve pregnancy outcomes
- Improve child health development
- Improve economic self-sufficiency of the family



SWDH NFP family at 2024 graduation

SWDH NFP Outcomes

- 89%** of babies in SWDH NFP were full term births in 2024
- 96%** of babies in SWDH NFP were born at a healthy weight in 2024
- 94%** of babies in SWDH NFP met developmental milestones at 18 months of age in 2024



SWDH NFP Success Stories

- “One Less Child Entering Foster Care”
- “Nicotine Cessation Success”



Parents as Teachers

Parents as Teachers is a voluntary, FREE early childhood development program offering an evidence-based home visiting model. Parent educators partner with families to raise children who are healthy, safe, and learning.



Support along the parenting journey



Parent-child
Interaction

Screenings and
Milestones

Resource
Connections

Group
Activities



A parent is a child's first and most important teacher. This FREE program offered through Southwest District Health provides parents with information to help build their child(ren)'s development prenatally to kindergarten.

CONTACT US

208-576-0056

parentsasteachers@swdh.id.gov





Engaging Families ✨ Creating Communities



Parenting is a precious responsibility.

Parents as Teachers helps you embrace it. Our free, evidence-based program connects you with resources to raise a child that's healthy, safe and ready for school. So you can be fully confident in your role as your child's first — and best — teacher.

Parents as Teachers is proven to:



Increase parent knowledge of early childhood development



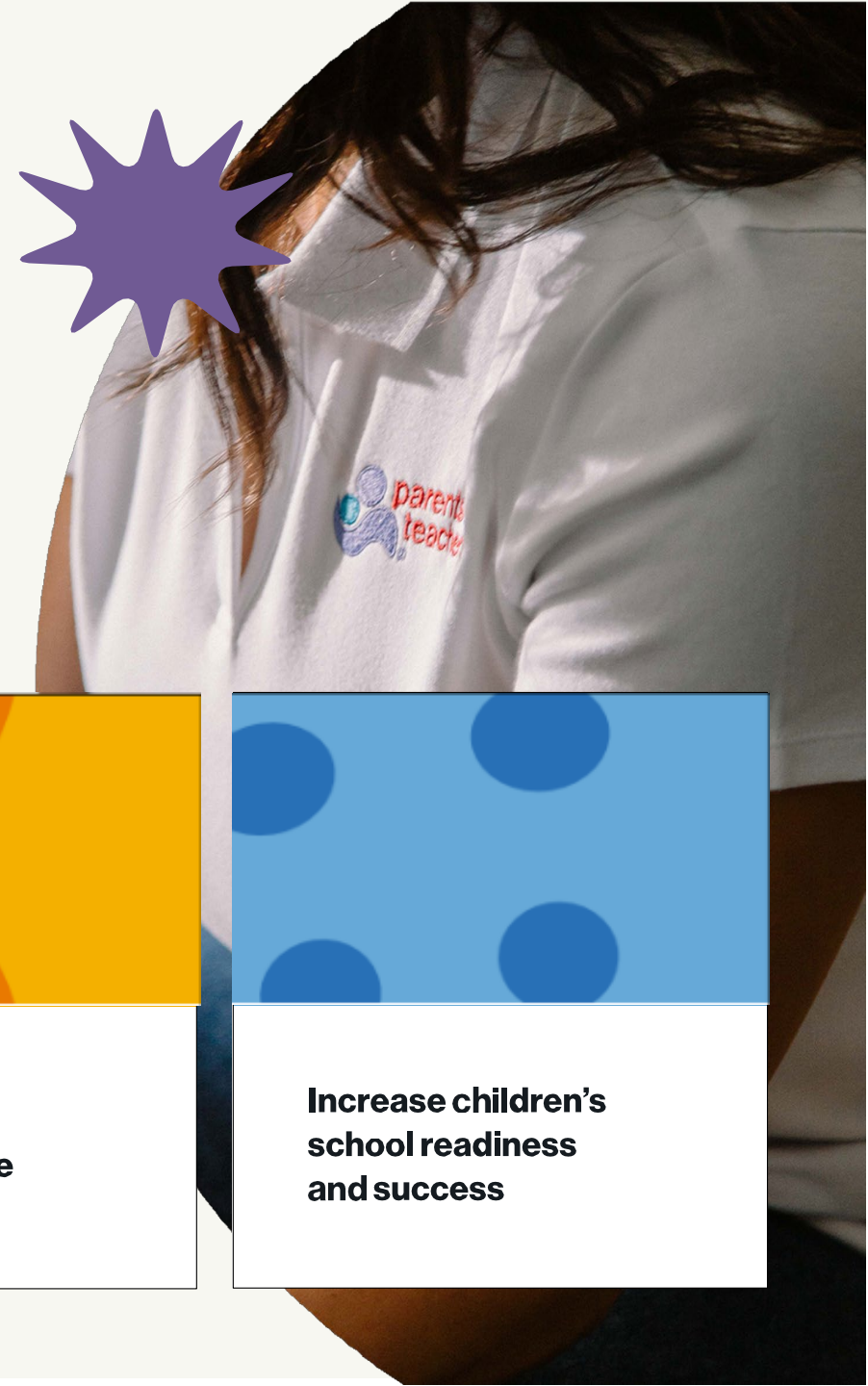
Improve early detection of developmental delays and health issues

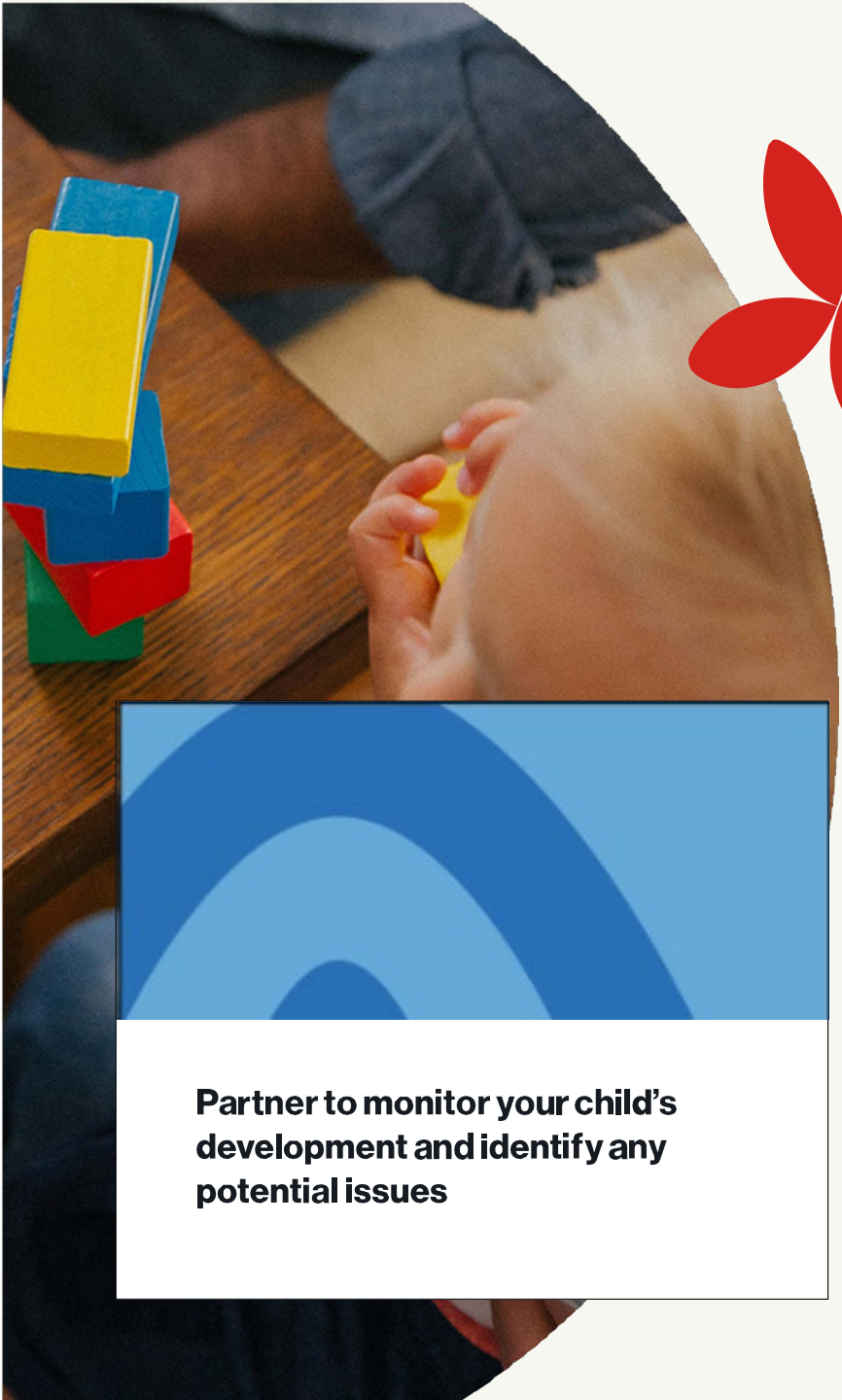


Prevent child neglect and abuse



Increase children's school readiness and success





How it works

SERVING EXPECTANT FAMILIES & CHILDREN UP TO 5

We'll start by matching you with a trained Parent Educator in your community. You'll work together to schedule a series of in-home visits to check in on your child's growth and development. And because this is your child and your family, the agenda is always centered around what you need.

Together, we will:



Partner to monitor your child's development and identify any potential issues



Facilitate conversation around the family dynamics and decisions impacting your child



Reflect on opportunities to improve your parenting knowledge, skills and behaviors



Our Model

The Parents as Teachers model is the blueprint used by affiliates around the world to deliver comprehensive support to families. While specific programs may vary from place to place, these essential requirements ensure you receive proven expertise — wherever you are.

Our model has four dynamic components:



Personal Visits:

Creating a safe space for reflection



Group Connections:

Facilitating meaningful dialogue between families



Child Screenings:

Checking for potential medical or developmental issues



Resource Network:

Connecting families with specialized resources as needed

Parents as Teachers at SWDH

- Parents as Teachers (PAT) program entered the public health sector as research increasingly highlighted the strong link between early childhood development and long-term health outcomes. The program expanded to address social determinants of health such as parental mental health, childhood trauma, and access to healthcare.
- 2018 - SWDH added Parents as Teachers to their home visiting services to complement Nurse Family Partnership and reach a wider demographic using state general funds.
- 2022 - SWDH Parents as Teachers Affiliate recognized by the Parents as Teachers National Center as a Blue Ribbon Affiliate.



Priority Populations

Young parents <21

Child with a disability or chronic health condition

Parent with a disability or chronic health condition

Parent with mental health issue(s)

HS diploma or GED not attained

Low income

Recent immigrant or refugee family

Substance use disorder

Foster care or temporary caregiver

Child abuse or neglect

Housing instability or sharing a home due to economic hardship

Parent incarcerated during child's lifetime

Very low birth weight and preterm birth

Death in the immediate family

Intimate partner violence

Military deployment

SWDH Affiliate Data

Population Reach July 2024 to April 2025

Families Served



75

Children Served



112

Families by County

Adams	1
Gem	1
Owyhee	1
Payette	3
Canyon	66

Personal Visits

546



Group Connections Offered

= 11

29 enrolled families attended

Parent Educators



Total	5
Full-Time	4
Part-time	1

2 bilingual parent educators



Program Services and Impact July 2023 to June 2024

Goals Documented



Resource Connections



Immunizations



91%
Of 19–35
month olds
reported up-to
date

Developmental Screening



Health Review



Top Referral Source
WIC 44%

Nurse Family
Partnership
SWDH Staff
Dept. of Health &
Welfare
swdh.org website

63 Potential delays/
concerns identified

Developmental	17
Social-emotional	3
Hearing	13
Vision	27
Physical Health	3





"My parent educator helped me learn new ways to support my two young children. This is helping me meet my parenting goals."



Parents as Teachers programs can support families who are involved with child welfare.

13 families enrolled this program year with past or current child welfare involvement

- ✦ Review the case plan with families
- ✦ Support services related to case plan completion
- ✦ Communication with caseworkers
- ✦ Preparation for visitation activities



WHAT'S THE BOTTOM LINE?



Significant long-term investments

- ❖ Reduced costs of child protection
- ❖ Reduced costs of K-12 special education and grade retention
- ❖ Reduced costs of criminal justice expenses

\$1.00 invest = \$1.75 to \$5.70 return

\$\$ High quality home visiting programs = Return on investment \$\$

Questions?

