

Home Visiting

MCH HV - Maternal & Child Health Home Visiting

MIECHV - Maternal, Infant & Early Childhood Home Visiting

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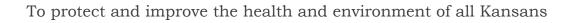
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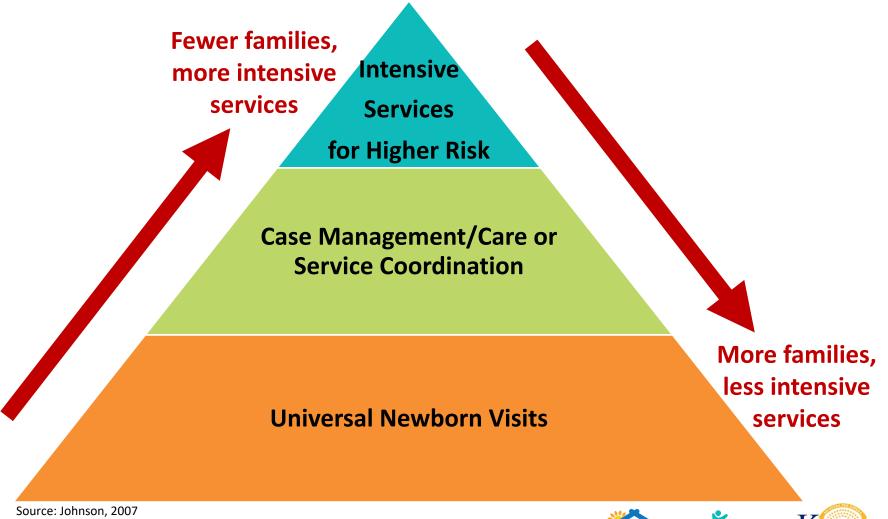


| | | | | | | Specialized HV | | |
|------------------------|--|---------------------------------|---|---|---|---|--|---|
| | Early Head Early Head Start (EHS) | Parents as Teachers (PAT) | Healthy Families Healthy Families (HFA) | Universal Maternal Child Health Home Visiting (MCH HV) | Nurse-Family Nurse-Family Partnership Partnership (NFP) | tiny-k Infant- Toddler Services (Tiny-K) | Teams for Infants Endangered by Substance Abuse (TIES) | Attachment and Biobehavioral Catch-up (ABC) |
| Curriculum | Evidence- based | Evidence- based | Evidence- based | Strengths- based | Evidence- based | | Promising Practice | Evidence- Based |
| Eligibility | Income based | Open | Interview/ Needs | Open | Income-based; first time moms | Developmental need | Parental substance use disorder | Needs based |
| Enrollment Age | Prenatal to 3 years | Prenatal to 6 years | Prenatal up to 3 months & serves up to 5 years | Prenatal to 12 months | Prenatal to 2 years | Newborn - 3 years | Prenatal to 2 years | 6 months - 4 years |
| Frequency of Visits | Weekly 90 minutes | Bi-monthly 60-90 minutes | Weekly- monthly 60-90 minutes | Needs based 1-2 visits 60-minute | Weekly - bi-weekly 60-90 minutes | Weekly- monthly 1 hour | Weekly 60-90 minutes | Weekly for 12 weeks |
| Other Notes | | | | | Only in Johnson and Shawnee counties | | Only in Wyandotte County | |

www.kshomevisiting.org



Continuum of Home Visiting



http://www.nccp.org/publications/pdf/text_862.pdf

Overview of MCH Home Visiting

UNIVERSAL MODEL



MCH Home Visiting Funding

- U.S. Department of Health & Human Services
 - Health Resources & Services Administration (HRSA)
 - Maternal and Child Health Bureau (MCHB)
 - Division of State and Community Health
- Children's Cabinet and Trust Fund
 Children's Initiative Funds (CIF)
- State General Funds (SGF



MCH Home Visiting Purpose



To provide home visiting services, specifically education and referral to community-based services, to all eligible women and their families through a universal, strengths-based approach.



MCH Home Visiting Goals

- Serve as a safety net for every expecting or new mother to receive an outreach/intake visit;
- Increase socio-emotional wellbeing by connecting with a supportive professional who screens and assesses for needs; and
- Coordinate referrals to any needed services in a community, including early intervention, concrete supports, childcare, and other early childhood and family programs.

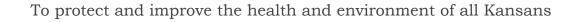




MCH HV - Target Populations

- Pregnant Women
- Mothers
- Infants up to 12 months
- 56 MCH Home Visiting Grantees



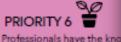


TITLE V MATERNAL & CHILD HEALTH 5-YEAR STATE ACTION PLAN 2021-2025

PRIORITY Women have access to & utilize integrated, holistic, patient-centered care before, during, & after pregnancy.

PRIORITY 7

Strengths-based supports & service are available to promote healthy families & relationships.



skills, & comfort to addre needs of maternal & c health populations.

Perinatal

PRIORITY 2 All infants & families have support from strong community systems to

OBJECTIVE 2.1

optimize infant health &

Promote and support cross-sector breastfeeding policies, practices, and environments to increase exclusive breastfeeding rates at 6 months by 2.5% annually through 2025.

💑 KANSAS

PRIORITY 2 All infants and families have support from strong community

systems to optimize

infant health and

well-being.

OBJECTIVE 2.2

Promote and support safe sleep practices and cross-sector initiatives to reduce the SUID rate by 10% by 2025.

OBJECTIVE 2.3

Implement at least two guality cross-sector initiatives focused on improving maternal, perinatal, and infant health in partnership with the Kansas Perinatal Quality Collaborative (KPQC) by 2025.

OBJECTIVE 2.4

Adolescent

CSHCN

Increase the proportion of pregnant and postpartum women receiving MCH Universal Home Visiting services by 15% by 2025.

Cross-Cutting/

& Maternal & Infant Systems Building To protect and improve the health and environment of all Kansans

Child







L & INFAN

s, practices, ates at 6

ctor initiatives

focused on irtnership with 2025.

% by 2025.

Overview of Maternal, Infant & Early Childhood Home Visiting

EVIDENCE-BASED MODELS



MIECHV Funding

- U.S. Department of Health & Human Services in partnership with Administration for Children and Families (ACF)
 - Health Resources & Services Administration (HRSA)
 - Maternal and Child Health Bureau (MCHB)
 - Division of Home Visiting and Early Childhood Systems



MIECHV Purpose

- Support Evidence-Based, Voluntary Home Visiting Services
- Serve Pregnant Women and Families with Young Children Birth to Kindergarten Entry

Especially those Priority Populations in At-Risk Communities



MIECHV Goals

| Improve: | maternal and child health |
|----------|---------------------------|
|----------|---------------------------|

Prevent: child abuse and neglect

- **Reduce:** crime and domestic violence
- **Increase:** family education level and earning potential
- **Promote:**children's development and readinessto participate in school
- Connect:families to needed communityresources and supports



Priority Participants

- Low income
- Pregnant women < age 21
- History of child abuse or neglect or interactions with child welfare services
- History of substance abuse or need SA treatment
- Use tobacco products in home

- Have, or have children with, low student achievement
- Have children with developmental delays or disabilities
- Families with members who are serving or have served in armed forces



Targeted At-Risk Communities

- Wyandotte County
- SE Kansas Counties
 - Cherokee
 Labette
 Montgomery
 Neosho
 Wilson





MIECHV Models

Evidence-Based

- Early Head Start Home-Based (EHS)
- Healthy Families America (HFA)
- Parents as Teachers (PAT)

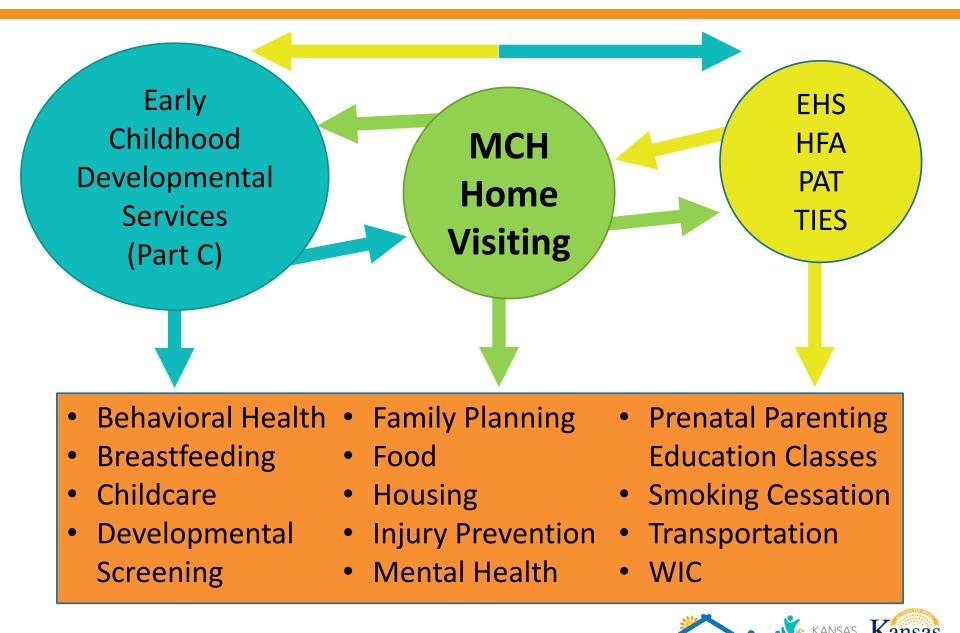
Promising Approach

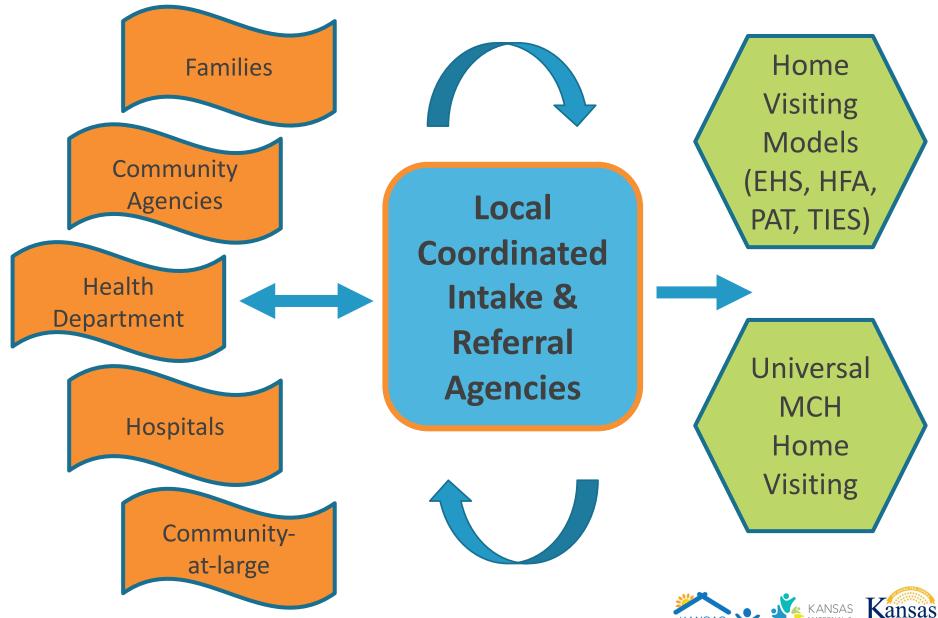
- Team for Infants Exposed to Substance abuse (TIES)
 - Kansas City only



Coordination Between Home Visiting Models







CHILD HEALTH

and Environmen

Home Visiting Program

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