Overview of the Early Head Start Home-Based Model for the Maternal, Infant and Early Childhood Home Visiting Program

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Presenter

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Agenda

Overview of the Maternal, Infant, and Early Childhood Home Visiting Program

Early Head Start (EHS) Home-Based Program Option

EHS Home-Based Program Option and MIECHV Program Resources
Overview of MIECHV

Authorized by the Affordable Care Act, the creation of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program responds to the diverse needs of children and families in communities at-risk.

Health Resources and Services Administration (HRSA) and Administration for Children and Families (ACF) are collaborating on MIECHV Program at the Federal level.

Additionally, this program:

- Provides an unprecedented opportunity for collaboration and partnership at the Federal, state, tribal, and community levels
- Improves health and development outcomes for at-risk children through evidence-based home visiting programs
Purpose of MIECHV Program

The MIECHV Program is designed to:

- Strengthen and improve the programs and activities carried out under Title V
- Improve coordination of services for at-risk communities
- Identify and provide comprehensive services to improve outcomes for families who reside at-risk communities

Affordable Care Act: Maternal, Infant and Early Childhood Home Visiting Program by Health Resources and Services Administration, Maternal and Child Health Bureau
http://www.hrsa.gov/grants/manage/homevisiting/
MIECHV Program Connecting At-Risk Families to Services

Through the MIECHV Program, nurses, social workers, or other professionals meet with at-risk families in their homes to:

- Evaluate families’ circumstances
- Connect families to services that can make a real difference in a child’s health, development, and ability to learn
  - Services may include: health care, developmental services for children, early education, parenting skills, child abuse prevention, and nutrition education or assistance.

Affordable Care Act: Maternal, Infant and Early Childhood Home Visiting Program by Health Resources and Services Administration, Maternal and Child Health Bureau http://www.hrsa.gov/grants/manage/homevisiting/
Successful Elements in Home Visiting Programs

Successful elements of home visiting programs include:

- Multi-faceted implementation
- Holistic assessment used to determine what families may or may not need with respect to services in the health, child protection, early education, and social services arenas

Affordable Care Act: Maternal, Infant and Early Childhood Home Visiting Program by Health Resources and Services Administration, Maternal and Child Health Bureau

http://www.hrsa.gov/grants/manage/homevisiting
Selection Process for Evidence-Based Home Visiting Models for MIECHV

In a contract with the ACF’s Office of Planning, Research and Evaluation, Mathematica conducted an evaluation of home visiting programs through:

- Review of research literature on home visiting program models
- Assessment of the evidence of effectiveness of home visiting program models that serve families with pregnant women and children from birth to age 5.
Selected Evidence Based Home Visiting Models for MIECHV

Nine evidence based home visiting program models identified for implementing the MIECHV program:

1. Early Head Start-Home Visiting
2. Family Check-Up
3. Healthy Families America (HFA)
4. Healthy Steps
5. Home Instruction for Parents of Preschool Youngsters (HIPPY)
6. Nurse Family Partnership (NFP)
7. Parents as Teachers (PAT)
8. Public Health Nursing Early Intervention Program for Adolescent Mothers
9. Child FIRST
Overview of Early Head Start (EHS)

Approximately 104,452 children and families enrolled in EHS

EHS Program Options [Head Start Program Performance Standards (HSPPS) 45 CFR 1306.31]

- Center-based program option (HSPPS 45 CFR 1306.32)
- Home-based program option (HSPPS 45 CFR 1306.33)
- Combination program option (HSPPS 45 CFR 1306.34)
- Family child care program option (HSPPS 45 CFR 1306.35)
Guiding Principles of EHS

- Emphasis on high quality
- Prevention and promotion activities
- Positive relationships and continuity
- Parent involvement
- Inclusion
- Cultural competence
- Comprehensiveness, flexibility, and responsiveness
- Transition planning
- Collaboration
Families and Children Served in EHS

EHS serves the most vulnerable children and families who are at-risk based on demographic factors identified in the Community Assessment [HSPPS 45 CFR 1305.3 (c) (1-6)]

- Diverse racial/ethnic groups including AI/AN and MSHS populations
- Parental education and employment
- Teen parents
- Families experiencing homelessness
- Foster care
- Infants and toddlers with disabilities
EHS Home-Based Model Website
EHS Home-Based Program Option

Unique characteristics of EHS home-based program option:

- Work within the environment where children and families are most comfortable and familiar to support learning opportunities
- Provide flexibility to offer support and child development services at times that are convenient to families
- Engage families whose life circumstances might prevent them from being able to participate in more structured settings
- Support families living in rural communities who may not otherwise be able to receive services
Components of the EHS Home-Based Program Option

Head Start Program Performance Standards (45 CFR 1306.33) provides guidelines and requirements for the delivery of EHS home-based services.

- **Home Visits**: 90 min. weekly home visits
- **Group Socializations**: 2 group socializations per month
EHS Home Visitors

Role of Home Visitor
- Support and strengthen parents’ or expectant parents’ skills and abilities to nurture healthy development of children

Home Visitor Responsibilities
- Maintain average caseload of 10 to 12 families; maximum of 12 families per home visitor [HSPPS 45 CFR 1306.33(a)(5)]
- Introduce, arrange, and/or provide Head Start comprehensive services in collaboration with community partners [HSPPS 45 CFR 1306.33(b)(2)]
Case Management, Training, and Supervision of Home Visitors

Case Management

Training

- Home visitors receive training to acquire or increase knowledge and skills

Reflective Supervision

- Reflective supervision allows home visitors to share and reflect on experiences and challenges in working with families
Collaboration with EHS

EHS grantees collaborate with community partners to provide comprehensive child development services (HSPPS 45 CFR 1304.41)
- Developmental screening, ongoing observation and assessment, curriculum planning
- Medical, dental, and mental health
- Child development and education
- Family partnerships and goal setting
EHS Home Visiting Model & MIECHV Program Benchmarks

EHS home visiting program model addresses the MIECHV Program benchmarks:

- Improved maternal and newborn health
- Child injuries, child abuse, neglect, or maltreatment and reduction of emergency department visits
- Improvements in school readiness and achievement
- Crime or domestic violence
- Family economic self-sufficiency
- Coordination and referrals for other community resources and supports
Additional Contacts for EHS Home-Based Model

For additional information on EHS home visiting model, please contact:

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