

MIECHV Newsletter

Maternal, Infant and Early Childhood Home Visiting Program July 2014



Welcome to the MIECHV monthly newsletter. We hope you will find the content informative. Our website will launch Spring 2014.

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Key Contacts

State MIECHV Lead:

Debbie Richardson, Ph.D.
Program Manager
Maternal & Child Health Home Visiting
Bureau of Family Health
Kansas Department of Health and Environment
785-296-1311
d Richardson@kdheks.gov

MIECHV Benchmark Reporting, Performance Management & Evaluation:

Teri A. Garstka, Ph.D.
Associate Director
Center for Public Partnership & Research
University of Kansas
785-864-3329
garstka@ku.edu

Evaluation Activities

Later this summer, the MIECHV state evaluation team will begin the third and final round of data collection for the Working Alliance Inventory (WAI) survey with home visitors and families. In addition to the survey, we will invite home visitors and a subset of families to participate in interviews and focus groups. In these interviews and focus groups, we will be digging deeper and asking questions to help us better understand the relationship between home visitors and families and what helps enhance versus hinder their working relationship. We are working now to create interview questions and would love to hear from home visitors, supervisors, and other home visiting stakeholders about what questions or topics they would like us to incorporate into the interviews. Please contact Jacklyn Biggs (jacklynbiggs@ku.edu) with your ideas by July 31st. Thank you!

Program Spotlight

Early Head Start

The Kansas MIECHV Program incorporates three evidence-based home visiting models: Early Head Start (EHS), Healthy Families America (HFA), and Parents as Teachers (PAT). The Early Head Start model is featured in this newsletter.

The Kansas Early Head Start (KEHS) program began in 1998 and is a national model serving at-risk infants and toddlers through home-based and center-based services. The program has expanded from \$6.3 million in FY 2000 to \$10.2 million in FY 2014. It is primarily financed by federal child care funds. KEHS is administered by the Kansas Department for Children and Families (DCF) under the Economic and Employment Services Division. This division also administers the State Head Start Collaboration Program. KEHS provides comprehensive services following federal Head Start Program Performance Standards for pregnant women and eligible families with children from birth through age 3. Fourteen Kansas-administered grant-funded EHS programs serve 48 Kansas counties and 1,006 enrolled slots for pregnant women and young children. Some local program agencies also receive federal funds. KEHS also works to increase the number of infant/toddler child care slots in communities and partners with existing community-based child care providers to improve the quality of child care available for infants and toddlers. The KEHS programs are required to partner with existing child care providers, center based and family child care partners, to provide child care services to families who are employed, attending school, or in job training. All KEHS child care partners must meet both Kansas Child Care Licensing and federal Head Start Program Performance Standards.

The Home Visiting Evidence of Effectiveness (HomVEE) review examined home visiting research literature and assessed the evidence of effectiveness for home visiting program models that

MIECHV CQI:

Kathy Bigelow, Ph.D.
Assistant Research Professor
Juniper Gardens Children's Project
University of Kansas
913-321-3143
kbigelow@ku.edu



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serve families with pregnant women and children from birth to age 5. Outcomes for eight domains as well as each model's implementation guidelines were evaluated. The HomVEE review of Early Head Start-Home Visiting indicated favorable impacts in five domains (child development and school readiness, family economic self-sufficiency, linkages and referrals, positive parenting practices, and reductions in child maltreatment) and at least one favorable impact in all five domains was sustained for at least one year after program inception and at least one favorable impact in three domains (child development and school readiness, family economic self-sufficiency, and positive parenting practices) lasted for at least one year after program completion. For more information on the HomVEE review and evidence based practice, click hereto visit their website: [Click Here!](#)

Kansas Early Head Start agencies involved with the Kansas MIECHV Program are Southeast Kansas Community Action Program (SEK-CAP) and Project EAGLE in Wyandotte County.

Shelli Walrod, Home Based Program Manager for SEK-CAP Head Start, believes EHS works. That, with the support of their home visitor, families increase self-sufficiency and improve their child's school readiness. The Early Head Start (EHS) model provides families opportunities for growth and success and facilitates self-sufficiency. Through weekly home visits, parents learn the importance of working with their children on a daily basis to enhance their development in five main areas: Social-Emotional, Physical, Language, Cognitive, and Literacy. Each child's progress is tracked for each domain through an electronic assessment system which produces a record for parents to present to schools when their child enters Kindergarten.

Parents are encouraged to attend socialization events, or "Play Groups", to assist them in building a network with other parents, to advance their child's social skills, and to enhance their parenting skills. Family engagement is also an important component of the EHS model. Parents are assisted in writing goals for themselves, their children, and their family.

In 2012, when the EHS model was implemented in Montgomery County as part of the MIECHV program, only 40% of families were employed. Home visitor, Judy Mustain, worked closely with families building strong relationships and providing training, resources, and encouragement. As a result, Judy's caseload family retention rate is high and, at the end of 2013, 100% of the families on her caseload were employed with one or both parents working.

Connections

Connections is a Centralized Intake and Referral System (CIRS) serving pregnant women and families with children under five years of age in Wyandotte County, KS. Its goals are to:

- Identify the immediate needs of the family
- Provide families timely, appropriate referrals to community agencies and, when needed, assist families to access these services
- Improve utilization of community resources through

appropriate referrals; resulting in the increased capacity of other community agencies.

The Connections team accomplishes these goals by providing families broad, efficient and sensitive screening for multiple risk factors. A phone-based triage of the family's needs begins the process. If an immediate need is identified during this initial contact, referrals are provided. If there are no immediate needs, families are scheduled for a 1½ -2 hour intake and referral visit. During this visit, which may be a home or office visit, the family completes a service wish list, an intake interview, and completes the screening process. Connections staff and the family work together to determine appropriate services such as healthcare, child development, parenting, or self-sufficiency and referrals are completed. At the end of the visit, the family completes a satisfaction survey on the Connections process. Approximately three weeks later, Connections staff follow-up with the family to ascertain the services they have accessed and their level of satisfaction with these services. If needed, problem solving support is provided at this time.

Reflected in the over 800 families Connections serves each year, is the strong foundation of community partnerships the Connections program was built upon. Connections is administered by Project EAGLE and is a key partner for the Wyandotte County MIECHV Program implementation.

Professional Development Opportunities

Mental Health First Aid Training

Mental Health First Aid is an adult education program to improve knowledge about mental health related issues and how to better respond to individuals experiencing a mental health crisis or the onset of a mental health issue. The program includes content on identifying risk factors, warning signs for addiction, how to encourage appropriate professional help and other support strategies. CEU's are provided. We will be working with local MIECHV teams to schedule training opportunities and assure all home visitor staff are trained.

What's Happening at the State Level

Home Visiting Communications Plan

The state home visiting strategic plan includes the goal to effectively communicate the value and benefits of home visiting programs in Kansas. With the help of the national MIECHV Technical Assistance Center and with input gathered from state and local work groups, a communications plan is being drafted. The plan will include development of a home visiting brand and message to better market home visiting programs and ensure a level of consistency in messaging across the state. The home visiting website currently under development will also utilize this branding.

The planning process incorporates identification of target audiences, the perceived values of each audience and what action(s) we hope the audience will take as the result of receiving the information. Marketing materials will be tailored to the audience in both content and media. At a minimum, fact sheets, scripts for public service announcements and local access channels, and

handouts with key messages and contact information will be developed. These materials will be designed to be used alone or in conjunction with locally developed materials.

Upcoming Activities and Dates for MIECHV Partners

July 1	Due date for quarterly data uploads.
July 11	SE Kansas MIECHV Team. 10:00-2:00pm, Labette County Mental Health Center, Parsons, KS.
July 15	MIECHV Program Activity and Progress Report. Due Jan-June, 2014.
July 16	State Home Visiting Steering Committee. 1:00-4:00pm, Curtis State Office Building, 3rd Floor, Topeka, KS.
July 18	Wyandotte County MIECHV Team. 9:00-12:30pm, Unified Government Health Department, 3rd Floor, Kansas City, KS.
August 1	Wyandotte County MIECHV Team. 9:00-12:30pm, Unified Government Health Department, 3rd Floor, Kansas City, KS.

Past MIECHV Newsletters

Past newsletters have been archived and can be accessed [here](#).

Contact Us

If you have ideas for the newsletter, feedback, questions, comments, concerns, etc. please email kshomevisiting@ku.edu.