Kansas Maternal Infant and Early Childhood Home Visiting Program

Assumptions

Evidence-based home visiting (HV) programs have a positive impact on pregnant women and families with infants and young children

Families are better served if HV services are child-focused, family-centered, culturally appropriate, and strengths-based

Aligning HV services to local community needs and to individual family needs is critical

HV programs must operate in the community's broad systems of care and services to be most effective

State and local organizations must collaborate, coordinate, share resources, use data, and engage parents to ensure HV services are effectively implemented & sustained

Resources

Committed and involved state and local agencies/organizations

Established evidence-based and promising approach HV programs

Federal MIECHV Program funds and technical assistance

State MIECHV Program Manager

University partnerships and data system resources

Kansas early childhood systems collaboration

Activities

- Develop a coordinated, integrated system of evidence-based HV programs in identified atrisk communities
- Increase the reach and capacity of existing Early Head Start, Parents as Teachers, and Healthy Families programs to serve at-risk populations
- Implement & evaluate a promising HV approach (TIES) to serve pregnant women and mothers of infants affected by substance use
- Implement effective engagement and retention strategies for hard-to-reach populations
- Implement locally coordinated centralized outreach, referral and intake processes
- Develop a coordinated and integrated data system to measure performance, ensure accountability, fidelity, and quality
- Provide coordinated cross-program training and technical assistance
- Facilitate collaboration and open communication among state & local agencies/organizations

Outputs

Improved coordination & referrals between HV programs and community resources

> HV models delivered with fidelity and quality

Increased number of families with identified risks served in high need communities

Improved engagement and retention of families in programs

Enrolled families
with mental
health and
substance use
concerns receive
services that
meet their needs

Outcomes

Benchmark 1

Maternal and Infant Health

- Increased prenatal care
- Increased preconception
- Increased inter-birth intervals
- Increased breastfeeding length
- Increased screening for maternal depression and substance use
- · Increased well-child visits
- Increased maternal and infant insurance coverage

Benchmark 3

Child Development & School Readiness

- Increased parental support for learning, knowledge of child development, positive parenting behaviors, and positive family functioning
- Increased screening for child communication, cognitive and motor skills, and socio-emotional development
- Increased child selfregulation for learning

Benchmark 2

Injury and Maltreatment Prevention

- Reduced maternal and child ER visits
- Increased injury prevention information
- Reduced child injuries
- Reduced reports of child maltreatment
- Reduced first time victims of maltreatment

Benchmark 4

Domestic Violence

 Increased screening, referrals, and safety plans for domestic violence

Benchmark !

Family Economic Self-Sufficiency

 Increased household benefits, educational attainment, and health insurance status

Benchmark 6

Coordination and Referrals for Resources & Support

- Increased identification of family needs, appropriate referrals, and receipt of services from referrals
- Increased MOUs and formal agreements among agencies
- Increased information sharing among agencies

that improve maternal, infant, and early childhood outcomes for at-risk families home visiting programs effective high quality, Coordinated,

Kansas Maternal Infant and Early Childhood Home Visiting: Competitive Grant

Enhanced Infrastructure and Resources to Existing MIECHV Home Visiting Programs Will Improve Reach, Engagement, Collaboration, and Mental Health and Domestic Violence Support Services to Effectively Support Home Visiting Outcomes

Innovation Activities	Outputs	Outcomes	
Maintain Development Project Caseloads Expand Home Visiting Caseloads and Coordinated Outreach and Referral to More Counties in Southeast Kansas Hiring of Bilingual Home Visitors to Increase Engagement of Diverse Populations	% Caseloads fully maintained in each community % Multi-lingual caseloads fully maintained	Improved Saturation and Reach of Services in Implementing Communities Improved Family Engagement and Retention in Home Visiting Improvement in MIECHV Benchmark Areas for At-Risk Families	ams that improve at-risk families
Cross-systems Training with Healthcare Access and Home Visiting Staff Bilingual Moving Beyond Depression Therapist in Wyandotte County Systematic Mental Health Consultation enhancement in Southeast Kansas Comprehensive Domestic Violence Plan	% Children and Families with Health insurance # Prenatal and well-child visits % Depressed Mothers who receive Mental Health services % Domestic Violence screenings, safety plans, and referrals completed	Improved Healthcare Access Decreased Depressive Symptoms, Improved Social Support Improved Parent-Child Relationships Improved Family Safety Improved Access & Engagement in Mental Health and Domestic Violence Support Services Improved Parent Engagement in Home Visiting Services	effective home visiting progr arly childhood outcomes for
Coordinated Intake and Referral Systems Development Enhance Home Visiting System Capacity and Sustainability Statewide Home Visiting Programs' Report on Selected Outputs and Outcomes Enhance Communication Strategies around Benefits of Home Visiting	# of Activities to Engage Communities on the Benefits of Coordinated Intake Kansas Home Visiting Sustainability Plan Kansas Home Visiting Report Card Home Visiting Communications Plan Core Competency and Best Practice Framework for Home Visitors	Increased Identification of At-risk Populations for Engagement into Services Decreased Waiting Time Between Referral and Service Engagement Improved Partner Coordination and Collaboration Home Visiting Program and Systems Sustainability Home Visitors Have Capacity to Engage and Retain High Risk Families	Coordinated, high quality, maternal, infant, and e

Home Visitor Professional Development