

# MIECHV Newsletter

Maternal, Infant and Early Childhood Home Visiting Program  
May 2014



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

## In This Issue

[MIECHV Reauthorization Update](#)

[Evaluation Activities](#)

[Program Spotlight](#)

[State Level](#)

[Getting to Know Your State MIECHV Team](#)

[Mental Health Awareness Week](#)

[Upcoming Activities and Dates](#)

## Key Contacts

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## MIECHV Reauthorization Update

At the end of March, Congress passed a bill that included a six month extension for the funding of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program which was subsequently signed by President Obama. This action authorizes a sixth year of federal funding for MIECHV for the period of October 1, 2014 through March 31, 2015. The bill had bipartisan support which is acknowledgment of the value placed on home visiting programs to help vulnerable families. While the extension was a short term victory for the MIECHV program, national efforts will continue to work toward a longer-term reauthorization of the home visiting program. Appreciation is extended to Kansas partners and citizens who made contacts to the state's congressional delegation regarding the MIECHV program.

The Health Resources and Services Administration (HRSA), the federal agency that administers the MIECHV Program and funds, is in the process of determining how the six-month extension and funding authorization will be managed. More information will be shared as it becomes available.

Additionally, HRSA released the funding announcement and instructions for the state Year 5 (federal fiscal year 2014) MIECHV formula funds, much earlier than prior years. KDHE will need to submit the application including an annual progress report, updated timeline and projected budget by May 23. The Year 5 allocation for Kansas will be approximately \$170,000 less than the last few years due to sequestration cuts passed by Congress last year and recalculation of some state population data. Thus, Kansas will be awarded only \$1 million rather than \$1.17 million in formula funds.

## Evaluation Activities

The second round of data collection activities are wrapping up for the Working Alliance Inventory survey with families and home visitors. At present, a total of 25 home visitors have participated, along with 192 families from their caseloads. In this second round of data collection alone, 153 families and their home visitors completed the Working Alliance Inventory. The third and final round of data collection for the Working Alliance Inventory will occur in summer 2014. Preliminary results of the survey will be presented on a poster at the National Conference on Child Abuse and Neglect in New Orleans April 29-May 1, and the poster will be shared with participating home visiting program staff at the next local team meetings. The Evaluation Team (including Mary Joy and Amanda Backer) would like to express our gratitude to all of the home visitors for their kindness and assistance tracking down families throughout this round of data collection.

## Program Spotlight TIES: A Promising Approach

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[Health Resources and Services Administration](#)

[University of Kansas Center for Public Partnership and Research](#)

In addition to requiring the use of approved evidence-based home visiting models, an intent of the federal MIECHV Program was to support continued innovation by allowing states to use a percentage of funds to support service delivery through promising approaches that do not yet qualify as evidence-based models. If a promising approach is implemented, a rigorous evaluation is required to further test effectiveness and build the empirical base toward the established standards for evidence-based practice as defined by Health Resources and Services Administration (HRSA).

The Kansas MIECHV needs assessment and state plan processes in 2010-2011 identified substance use by pregnant women and mothers of infants and young children as a substantial concern in the state, and home visiting programs experienced challenges providing services to address these specific needs. Thus, Kansas proposed the inclusion of TIES as a promising approach in the state's MIECHV Program.

More than 20 years ago, Children's Mercy Hospital in Kansas City, Missouri developed the Team for Infants Endangered by Substance abuse (TIES) program. The goal of TIES is to identify and support pregnant and postpartum women and their families affected by substance abuse to promote child development and healthy family functioning. To address this goal, the TIES Program targets intervention to improve (a) parent gains toward a drug-free lifestyle; (b) parenting skills and capacity to support child development; (c) parent response to child health/mental health care needs; (d) parent response to self-health/mental health care needs; (e) access to adequate, stable income; and (f) access to stable, safe, and affordable housing. As a comprehensive program utilizing intensive case management and home visiting, TIES works to ensure enrolled families receive individualized, culturally appropriate services including crisis intervention, substance abuse treatment, counseling, child development and parenting supports, and connection to other community services. Previously, TIES was only able to serve Kansas City, MO. Kansas MIECHV has allowed the expansion and evaluation of TIES into Kansas City, KS in Wyandotte County. In August 2012, TIES enrolled their first Kansas families.

Over the years, TIES has been a grantee of the federal Abandoned Infants Assistance Program of the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Findings from multiple evaluations have indicated promising positive impacts on maternal, child, and family factors. Engaging in the Kansas MIECHV program as a promising approach has allowed TIES to further refine and define their program model. Using implementation research to guide the process, the evaluators and program staff worked together to document the TIES Program model. The culmination of this work is a TIES Blueprint that will serve as a guide for effective and efficient implementation of the TIES Program in other settings. Through federal/national MIECHV technical assistance, TIES was able to seek and receive feedback from national leaders in the field which strengthened the content and scope of the TIES Blueprint. The development of this document has been a key part of the required rigorous evaluation as a MIECHV promising approach and will also be helpful to potential further replication of the TIES model in Kansas and other states.

Oneta Templeton is the TIES Program Manager with Children's Mercy Hospital, and program evaluators include Drs. Kathy Fuger, Jovanna Rohs, and Ronda Jenson with the Institute for Human Development at the University of Missouri-Kansas City. Oneta and her staff have been deeply involved in the Wyandotte County MIECHV team work, and the evaluation team participates on the MIECHV Data/Evaluation/CQI Workgroup. In addition to collecting and reporting all the same Benchmarks data as the other local MIECHV programs, the team has conducted an implementation evaluation and are finalizing plans to start their rigorous effectiveness study later this year.

## **What's Happening at the State Level**

### **Reflective Supervision Update**

There is good news to report. A contract with Shelley Mayse to facilitate Reflective Supervision groups has been finalized. Shelley previously provided this service through The Family Conservancy for MIECHV program supervisors and home visitors in Wyandotte County. Feedback from the staff was overwhelmingly positive and we are pleased that Shelley will again provide the reflective supervisions groups for Wyandotte County as well as initiate groups with the Southeast Kansas MIECHV staff.

In Reflective Supervision/consultation (RS), home visiting staff engage in a supportive relationship with a supervisor or consultant to explore the feelings and experiences raised by working with infants and young children and their families over time. It is distinct from administrative supervision. RS has received considerable attention for its potential to improve the quality of work with families and their infants and young children and is being described in the literature as a Best Practice approach (e.g., Zero to Three Journal, Infant Mental Health Journal).

Shelley Mayse, MSW, LSCSW, IMH-E® IV, has over 20 years of experience with children and families, providing home visiting services, mental health interventions and training. She is a licensed specialist clinical social worker and is one of only four individuals in the state endorsed through the Kansas Infant Mental Health Association (KAIMH) as Clinical Infant Mental Health Mentors (level IV). Shelley has received ongoing training in RS from national leaders in the field (e.g., Zero to Three, Michigan Association for Infant Mental Health).

### **Home Visiting/Domestic Violence Collaboration**

Addressing domestic violence in families served by home visiting programs is a key component of the MIECHV Program. Benchmark indicators established to measure progress related to domestic violence include assessing abuse risk through screening, referrals to domestic violence services and the completion of safety plans. A review of benchmark data indicates a need for more training on domestic violence screening and referrals.

Starting in November 2013, a state level workgroup has been meeting to identify ways to improve collaboration and identify cross system training needs across home visiting and domestic violence programs at both the state and local level. The workgroup includes representatives from state level home visiting programs, the

Kansas Coalition Against Sexual and Domestic Violence (KCSDV), the Kansas Department of Health and Environment, and the KU Center for Public Partnerships and Research.

The workgroup recently completed an electronic survey of local/regional home visiting and domestic violence program staff across the state. The survey assessed training needs, evaluated the level of urgency on domestic violence issues and gathered input on current and future collaboration between the two groups. Survey results indicate a desire and a need for better collaboration between programs. Results also point to concerns about confidentiality by domestic violence programs and the need for a better understanding of Kansas laws regarding domestic violence by both home visitors and domestic violence advocates. Other top priorities include understanding how home visitor/domestic violence programs can support each other, personal safety and awareness of domestic violence programs/services at the local level.

The workgroup will develop training materials to address the needs identified by the survey. Training will begin with MIECHV partners, but materials will be developed for use by programs across the state. Best practices in other states are being reviewed as a starting point for further discussion on improving collaboration. Thank you to everyone who completed the survey. Your input is guiding our work.

## **Getting to Know Your State MIECHV Team**

### **KU - Center for Public Partnerships and Research (CPPR)**

Dr. Teri Garstka is the Assistant Director of CPPR and leads the CPPR MIECHV team. In addition to her administrative responsibilities at CPPR, Teri is the principal investigator on a number of evaluation and data related projects for CPPR; including MIECHV. Dr. Jacklyn Biggs is a Research Analyst at CPPR. Aslead evaluator for the MIECHV Program she is studying Moving Beyond Depression outcomes and the impact of Motivational Interviewing and collaboration between partners. Jared Barton is also a Research Analyst with CPPR and is responsible for MIECHV data collection and management efforts. Betsy Thompson is a project coordinator assisting with MIECHV communications, social marketing and outreach, professional development and partner collaborations.

## **Mental Health Awareness Week**

Project LAUNCH is offering a series of webinars for Mental Health Awareness Week from May 5th through May 9th. For more details about the webinars and to register please click the following link:

[Click here for webinars!](#)

## **Upcoming Activities and Dates for MIECHV Partners**

May 5-9 Mental Health Awareness Week Webinars

May 9 SE Kansas MIECHV Team Meeting (10:00-2:00,

- Labette Center for Mental Health, Parsons)
- May 16 State Home Visiting Workgroup (10:00-2:00, DCF Learning Center, Topeka)
  - May 22 Wyandotte County MIECHV Team (12:00-4:00, TBA)
  - May 30 Motivational Interviewing Part II Training - Wyandotte County (9:00-3:00, Unified Government Public Health Dept., 3rd Floor Auditorium)
  - June 6 State MIECHV Data/Evaluation/CQI Workgroup (9:00-11:30, KU-CPPR, Lawrence)
  - June 17 Motivational Interviewing Part II Training - SE Kansas (9:00-3:00, Labette Center for Mental Health, Parsons)

### Contact Us

If you have ideas for the newsletter, feedback, questions, comments, concerns, etc. please email [kshomevisiting@ku.edu](mailto:kshomevisiting@ku.edu).