

MA Home Visiting Initiative MHVI

Leveraging MIECHV to Promote a Coordinated System of Family Support

New England States on Home Visitation
Dec 2, 2013



Massachusetts' Early Childhood Vision

Governor Patrick's Executive Order #505: Establishes MA Readiness Cabinet & Four Core Beliefs and Expectations

- Each child deserves the best possible opportunity
- Education and development occur in families, neighborhoods, communities, schools and in the broader society
- Services and delivery systems must collectively address the needs of the whole child and his or her family
- Accomplishing this will depend upon a consistent, efficient and effective coordination of effort among governmental agencies

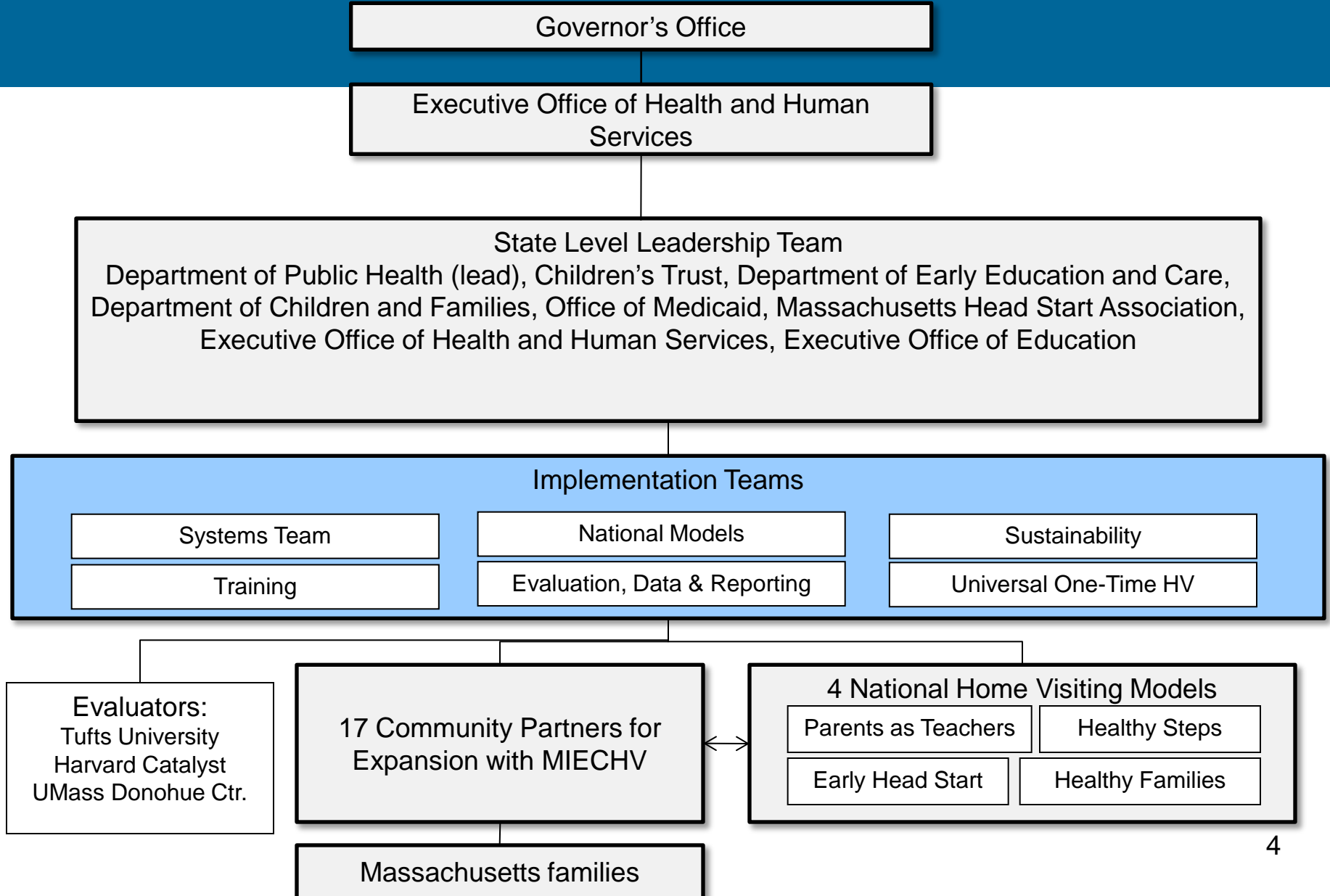


Early Childhood Systems: Coordination is Key

- Children and families get the services they need
- Families are supported: there's no wrong door to services
- Families get consistent messages, common approaches, and coordinated plans
- Staff know where and how to refer families and trust that families will get what they need
- Avoid gaps in and duplication of services
- Common data collection helps with service planning, quality improvement and targeting of resources



MHVI Governance Structure



MHVI Models and Target Population

- EHS in two communities, enrolls parents of any age or parity through child's age 3
- Healthy Families America in one community enrolls parents of any age and parity through child's age 5
- Healthy Families MA (statewide) expansion in 14 communities, enrolls first-time teen parents through child's age 3 (all first time parents in 7 communities)
- Healthy Steps in two communities, enrolls parents of any age and parity through child's age 3
- Parents as Teachers in three communities, enrolls parents any age and parity through child's age 5



Strategy: Leveraging MIECHV Funding

Activities to Enhance the Early Childhood System of Care = \$10.9M/year

Expand National Home Visiting Models

Healthy Families

Parents as Teachers

Healthy Steps

Early Head Start

\$6.0M

+

Enhance MA Home Visiting Services

Moving Beyond Depression (IH-CBT)

Parents Together

Enhance Training & Expand HV and Participant Support

\$2.2M

+

Build statewide systems

Pilot Welcome Family MA
(universal home visit)

Evaluate progress & capture data

\$2.7M

Strategy: Key System Activities

Statewide Forum

Statewide meeting with all 17 communities focused on collaborations at the community level and integration into a statewide system

Sustainability Team

Strategize development of HV as a reimbursable service and other financial supports

Cross-Agency Trainings

Develop & implement MHVI training curriculum to support workforce development

Universal 1-time Home Visit

Develop, pilot, implement, & evaluate one-time universal home visiting program in 17 communities

Evaluation, Data & Reporting

Implement data monitoring, quality assurance and reporting. Also evaluate community context and readiness

Community Panel Discussions

Community level discussions to explore systemic issues and barriers (and opportunities for assistance)

TA to Communities

Work with agencies on the community and state level to improve collaboration and reduce duplication of efforts

Strategy: Leveraging Technology

- **Common database**
 - Most MHVI program models use a common database for benchmark data
 - Participant Data System (PDS) modified for data entry and reporting used by HFM, EHS and PAT
 - ETO used by Healthy Steps
- **Tablets for home visitors**
 - Enhancing data entry
 - Participant activities and teaching



Strategy: Leveraging Training

- **Developed common trainings for model specific and MHVI required trainings**
 - Domestic violence, substance use, motivational interviewing, mental health, ASQ/ASQ: SE
 - Parent Cafes
 - Injury Prevention
- **Best Practices Networks for home visitors and supervisors**
 - Focus on strengthening early childhood system
 - Cross program and cross model staff networking
 - Connecting programs to broader community system
 - Includes all EBHV funded through state and federal sources
 - It works! Home visitors developed a cross-model best-practice guide to reduce no-shows



Strategy: Leveraging Evaluation

Tufts University: 2 components

- Process: Evaluate entire MA Home Visiting Initiative: will look at process measures, family utilization of services, etc
- Longitudinal: Follow up of families who were previously enrolled in HFM to determine long term outcomes

Donahue Institute, University of Massachusetts

- Purpose: Evaluate community readiness to advance an early childhood system

Harvard Catalyst: 2 components

- Statewide: Evaluate the overarching statewide systems of early childhood care/family support & sustainability mechanisms
- Welcome Family Massachusetts: Evaluate the implementation, effectiveness, and outcomes of the universal postpartum one time visit by nurse



Strategy: Leveraging Evaluation

Using findings to strengthen early childhood system of care

- Results at state, community, and individual program levels will inform strategies at the policy, fiscal and program levels to improve service delivery and ensure sustainability

MA has a history of using evaluation to support program enhancements

- Previously completed HFM evaluation identified needs of program participants which informed enhancements
- MHVI and Title V needs assessments identified priority needs and high-risk communities
- On-going review of EBHV and MA developed home visiting programs highlight unmet needs
- Program enhancements include:
 - Moving Beyond Depression – in-home cognitive behavioral therapy
 - Parents Together – strengthening social supports

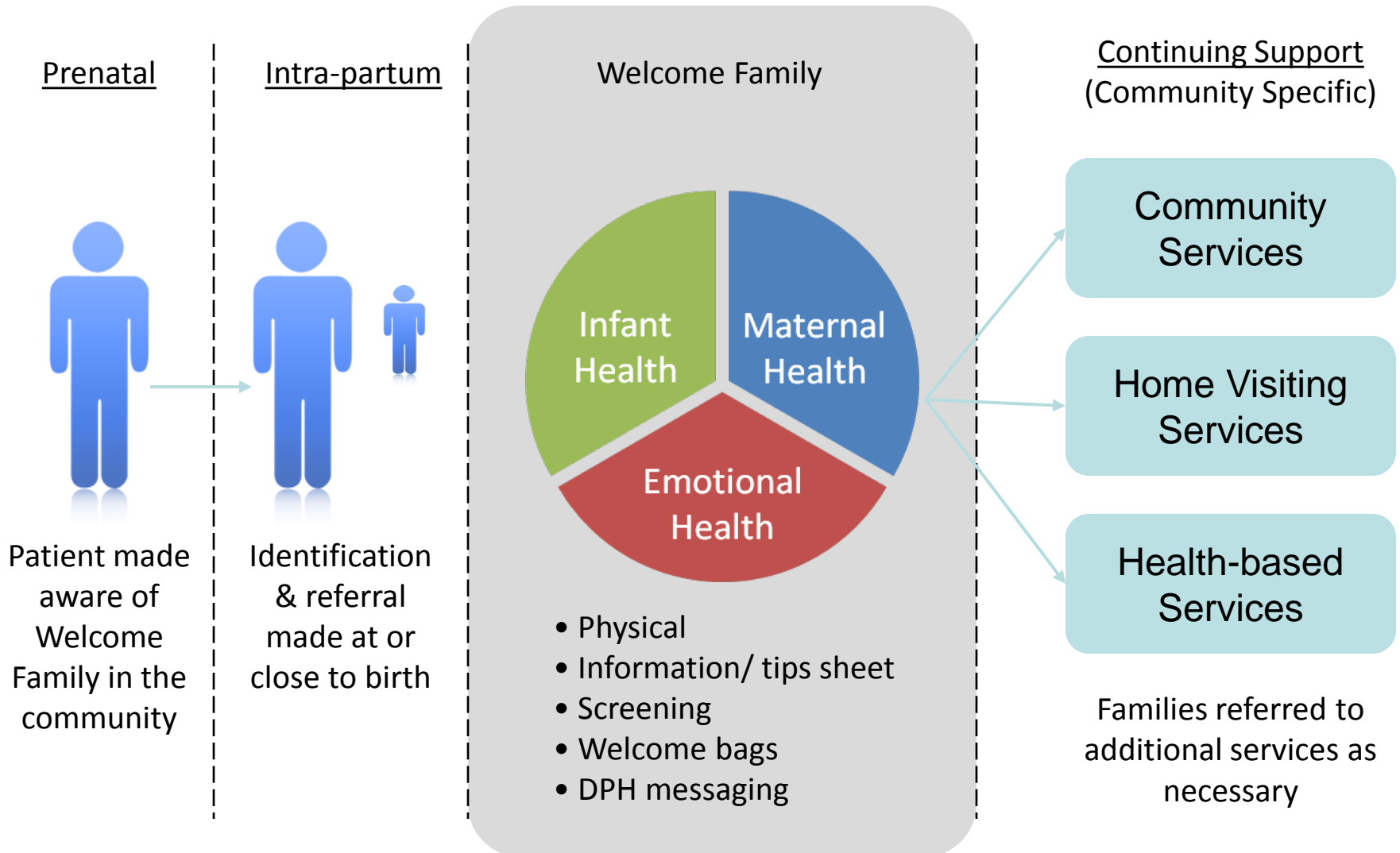


Strategy: Universal One-Time Home Visit

- One-time home visit for all families who give birth in the 17 communities 2 – 4 weeks postpartum
- Nurse provides home visit
- Focus on maternal and infant health
- Home visit will link families to services based upon need
- Program development has involved stakeholders and community partners
- Piloting in Boston and Fall River – expanding to other communities



Where does Welcome Family fit in a System of Care?



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