

## SUMMARY

### State of Kansas Updated State Plan for the Maternal, Infant and Early Childhood Home Visiting Program Submitted 6/8/11

#### State Home Visiting Program Goals and Objectives:

Goal 1: Deliver a coordinated, integrated system of evidence-based home visiting programs with high model fidelity and quality to families with pregnant women and children (0-5) in at-risk communities.

Objective 1: Increase the number of families with identified risks served in targeted communities by evidence-based home visiting programs (i.e., Early Head Start, Healthy Families America, and Parents as Teachers) and a promising home visiting approach (TIES).

Objective 2: Ensure program services are aligned with local and individual family needs so that families receive services that best fit their needs.

Objective 3: Improve coordination and referrals between home visiting programs and other community resources.

Objective 4: Build capacity for locally coordinated, centralized outreach, referral and intake processes

Objective 5: Ensure accountability, model fidelity, and quality through coordinated cross-program training, technical assistance and monitoring.

Goal 2: Effectively engage and retain underserved, hard-to-reach populations in home visiting services.

Objective 1: Build home visiting programs' capacity to effectively engage and retain families in services.

Objective 2: Build home visiting programs' capacity to involve fathers in services.

Objective 3: Build home visiting programs' capacity to appropriately address mental health and substance abuse concerns of referred and enrolled families.

Objective 4: Implement a promising home visiting approach to serve pregnant women/ mothers with substance use problems and their families.

Goal 3: Utilize a coordinated, integrated system to determine outcomes and quality of home visitation programs.

Objective 1: Select common indicators and measures across home visiting programs.

Objective 2: Develop and utilize a common data collection and reporting system across home visitation programs.

Objective 3: Assess program outcomes (i.e., MIECHV Program benchmarks and constructs) and implementation quality.

Objective 4: Utilize data for continuous quality improvement.

Objective 5: Evaluate a promising home visiting approach to serve pregnant women and mothers with substance use problems.

**Targeted communities** selected for initial implementation: Wyandotte County & Montgomery County

**Other communities** identified as being at highest risk in the Kansas needs assessment but not selected for initial implementation due to limited FY 2010 MIECHV funding:

- Cluster of counties in rural southeast Kansas in addition to Montgomery County - Bourbon, Cherokee, Crawford, and Labette
- Sedgwick County (including Wichita)
- Shawnee County (including Topeka)

**Montgomery County top priorities:**

- Expand the caseload capacity of the Early Head Start (EHS), Healthy Families America (HFA), and Parents as Teachers (PAT) evidence-based home visiting programs to serve additional Montgomery County families. An additional home visitor will be hired for each program. Some programs will emphasize recruiting and hiring individuals who are bilingual in English and Spanish.
- Develop a coordinated, centralized system for community awareness, outreach, referral, screening, and intake, and other cross-program functions (e.g., staff training, parent groups, coordination with other services). This will include all home visiting programs and other related community services for families with pregnant women and young children. A coordinator will be hired. The intent is to eventually expand to multiple counties in the southeast area.
- Enhance capacity of the programs to serve families experiencing substance abuse, domestic violence, and mental health concerns. This includes increasing the ability of staff to identify, engage, serve, and refer families with such concerns by providing additional training and consultation and increasing collaboration and referrals between the home visiting programs and substance use treatment, domestic violence, and mental health providers.

**Wyandotte County to priorities:**

- Enhance the capacity of the system of home visiting programs to serve families experiencing substance abuse and mental health concerns. This will be addressed by:
  - Expanding the caseload capacity of the EHS, HFA, and PAT programs to serve additional families. In the first year, an additional home visitor will be hired for each program site. Families to be served will have been identified as having substance abuse and/or mental health risk factors.
  - A promising approach home visiting program to specifically serve pregnant and postpartum women affected by alcohol or other drugs and/or HIV, the Team for Infants Endangered by Substance Abuse (TIES) Program, will be added to the delivery system.
  - Additional training and consultation for staff on identifying, engaging, serving, and referring families with mental health and substance abuse concerns.
  - Specific steps to increase awareness, referrals, and collaboration between the home visiting programs and substance use treatment and mental health providers.

**The plan also includes:**

- Rigorous evaluation of the TIES Program as a promising approach
- Additional training for local programs
- Developing/coordinating state level cross-program procedures for monitoring, quality assurance, fidelity, Continuous Quality Improvement (CQI)
- Developing a state-level comprehensive, cross-program data collection and reporting system
- Collecting cross-program data using common indicators and measures, both for required Benchmarks and for CQI