



Early Head Start In MN

MN Home Visiting Coalition

October 15, 2018



Minnesota Head Start Association, Inc. *Strengthening Children, Families & Communities*

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About Early Head Start

Early Head Start supports pregnant women, fathers and family members to access prenatal and postpartum information, education, and resources:

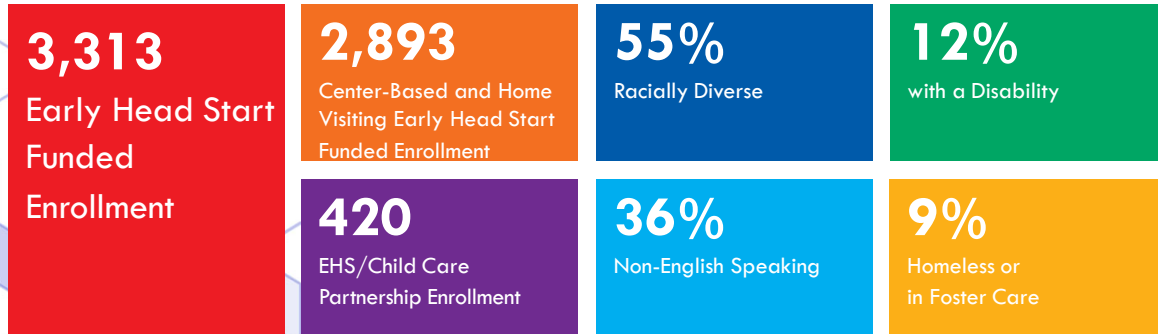
- Fetal Development
- Nutrition
- Risks During Pregnancy
- Labor and Delivery
- Postpartum Recovery
- Infant Care and Safe Sleep Practices
- Parental Depression/Emotional Well-being
- Breastfeeding



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EHS Children and Families Served: By the Numbers



Source: State and Federal Enrollment, Minnesota Department of Education and 2016–17 Federal Program Information Report, Minnesota.

Early Head Start Programs and Service Areas

The Early Head Start Model in Minnesota:

- 33 Federal- and State-funded Early Head Start program, including 8 Tribal Early Head Start programs



Early Head Start: Evidence-Based Home Visiting Model

- Approximately 156,435 children and families enrolled in Early Head Start (EHS) nationwide
- EHS Program Options include (HSPS 1302; Subpart B):
 - Center-based program option
 - Home-based program option
 - Family child care program option
 - Locally Designed program option

Guiding Principles for Early Head Start

- Emphasis on high quality
- Prevention and promotion activities
- Positive relationships and continuity
- Parent Engagement
- Inclusion
- Cultural competence
- Comprehensive, flexibility and responsiveness
- Transition planning
- Collaboration

Families and Children Served in Early Head Start

- Early Head Start serves the most vulnerable children and families who are at-risk based on demographic factors identified in their Community Assessment (HSPS 1302.11(b))
 - Diverse racial/ethnic groups including American Indian/Alaskan Native and Migrant populations
 - Families experiencing homelessness
 - Children in foster care
 - Teen parents
 - Parental education and employment
 - Infants and toddlers with disabilities or chronic health conditions

Early Head Start Home-Based Program Option

- For Early Head Start programs, the home-based option is required and may be used to deliver services to some or all of a program's enrolled children
- Home-based services are delivered through visits with pregnant women and/or a child's parents, primarily in the child's home
- Group socialization opportunities in a Head Start classroom, community facility, home, or on field trips are provided to all enrolled families.
- Eligible families are continuously enrolled from pregnancy or birth through the infant and toddlers 3rd birthday or enrollment in Head Start.

Components of the EHS Home-based Program Option

Service duration (HSPS 1302.22(c))

- (1) Early Head Start. By August 1, 2017, an Early Head Start home-based program must:
 - (i) Provide one home visit per week per family that lasts at least an hour and a half and provide a minimum of 46 visits per year; and,
 - (ii) Provide, at a minimum, 22 group socialization activities distributed over the course of the program year.

Early Head Start Home Visitors

- Role of Home Visitors
 - Support and strengthen parents' or expectant parents' skills and abilities to nurture healthy development of their children
- Home Visitor Responsibilities
 - Maintain average caseload of 10 to 12 families, maximum of 12 families
 - Introduce, arrange and/or provide Head Start comprehensive services in collaboration with community partners
- Training and Supervision
 - Home visitors receive training to acquire or increase knowledge and skills
 - Reflective supervision allows home visitors to share and reflect on experiences and challenges in working with families

Comprehensive Services for Early Head Start

Early Head Start programs deliver comprehensive child development services in partnership with community partners

- Developmental screening, ongoing observation and assessment, curriculum planning
- Medical, dental and mental health
- Child development and education
- Family partnerships and goal setting

EHS Home Visiting and MIECHV Program Benchmarks

- EHS home visiting program model addresses the MIECHV Program benchmarks:
 - Improved maternal and newborn health
 - Child injuries, child abuse, neglect or maltreatment and reduction of emergency department visits
 - Improvements in school readiness and achievement
 - Crime and domestic violence
 - Family economic self-sufficiency
 - Coordination and referrals to other community resources and support

What Success Looks Like in Early Head Start

Outcomes for Children and Families include:

- Prenatal Health Care and Education
- Mental Health Care Access
- Up-to-date Well Child Checkups
- Up-to-date Immunizations
- Continuous Health Care Access
- Continuous Dental Care Access
- Children Achieving Development Milestones
- Healthy Families



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