

Minnesota Coalition for Targeted Home Visiting

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Home Visiting Standards Summary

Prologue

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For purposes of definition and consensus, a **Targeted Home Visiting program** is a program that uses ongoing long term, intensive home visiting as a primary service delivery strategy and offers services on a voluntary basis to pregnant women, expectant fathers, and parents and primary caregivers of children from birth to kindergarten entry. Communities should define a population that will be offered home visiting services and the outcomes the program plans to achieve with the targeted home visiting program. The principles of home visiting in Minnesota include these elements: best fit for families with a menu of choices based on family need, flexibility to best use local resources and meet local needs, grounded in science, serving diverse populations, allowing opportunity for innovation, voluntary, and targeted to families at risk.

Targeted home visiting does not include provision of case management or a one-time visit or infrequent visits such as a home visit for a newborn child or a child in preschool. It does not include IEP/IFSP services provided under Part B or C or services provided by child protection.

A program choosing to adopt an evidence-based home visiting model approved by the Health Resources and Services Administration to receive Maternal, Infant, and Early Childhood Home Visiting (MIECHV) funding and ensuring that the program maintains fidelity to the model, has been deemed sufficient to meet the Minnesota standards.

The program standards provide a common understanding of how targeted intensive home visiting services must be delivered to achieve positive, measureable outcomes for infants, toddlers and their families. Building on practice that currently exists; the intent was to develop a base of standards for intensive home visiting, which are based on research.

Summary Standards

Home Visiting Standard Area 1:	1.1. Eligibility
Program Participation <i>This standard determines target population, prioritization,</i>	1.2. Recruitment

<p>recruitment requirements, periodicity, duration and intensity. Programs are required to be voluntary and free.</p>	<p>1.3. Program Procedures and Practices</p>
<p>Home Visiting Standard Area 2:</p> <p>Culturally Responsive Service Delivery</p> <p><i>This standard specifies the service delivery practices necessary to work effectively with people from a variety of abilities, languages, identities, realities as well as ethnic, cultural, political, economic, and religious backgrounds. Culturally responsive service delivery practices are implemented while taking into consideration the dynamics and structure of each family as they define themselves.</i></p>	<p>2.1. Training</p>
	<p>2.2. Reflection of community</p>
	<p>2.3. Relationship-based</p>
	<p>2.4. Program procedures, practices, curriculum and the materials</p>
	<p>2.5. English language learners</p>
	<p>2.6. Supervision</p>
<p>Home Visiting Standard Area 3:</p> <p>Relationship-based Practices</p> <p><i>This standard establishes the process, tools and strategies to focus on parent-child attachment and healthy emotional relationships and work with all members of the family who want to participate.</i></p>	<p>3.1. Program procedures and practices</p>
	<p>3.2. “Relationships” as the focus of the work.</p>
	<p>3.3. Family as a “whole”</p>
	<p>3.4. Use of observations, screenings, and assessments</p>
	<p>3.5. Strength based</p>
	<p>3.6. Individualized</p>
	<p>3.7. Home Visitor training</p>
	<p>3.8. Reflective Supervision/Consultation</p>
<p>Home Visiting Standard Area 4:</p> <p>Family Goal-Setting</p> <p><i>This standard determines tools and usage of state approved screening processes, ongoing assessment and goal setting, referrals, follow up and case management process</i></p>	<p>4.1. Establishing Goals with Families</p>
	<p>4.2. Screening, Referral & Follow Up</p>
	<p>4.3. Suspicion of child abuse/neglect</p>
	<p>4.4. Follow-up on referrals</p>
	<p>4.5. Community Resources & Collaborations</p>
	<p>4.6. Family Satisfaction Surveys</p>
<p>Home Visiting Standard Area 5:</p>	<p>5.1. Research based curriculum</p>
	<p>5.2. Family specific and needs-based</p>

<p>Curriculum and Service Delivery Approach</p> <p><i>This standard defines the use of research-based curriculum or use of the curriculum of the evidence-based model or promising approach to home visiting the program has adopted.</i></p>	<p>5.3. Implementation of family plan</p> <p>5.4. Discontinuation of service</p> <p>5.5. Program Evaluation</p>
<p>Home Visiting Standard Area 6:</p> <p>Program Management Systems</p> <p><i>This standard determines the systems that must be in place for planning, record keeping, reporting, communication, program-level self-assessment, ongoing monitoring, fiscal management, caseload size and caseload size management.</i></p>	<p>6.1. Planning</p> <p>6.2. Organizational Management</p> <p>6.3. Recordkeeping</p> <p>6.4. Consent</p> <p>6.5. Communication</p> <p>6.6. Program-level Self-Assessment</p> <p>6.7. Fiscal Management</p> <p>6.8. Intensity, duration of service and caseload size</p> <p>6.9. Safety Assurance</p> <p>6.10. Ongoing Program Monitoring</p>
<p>Home Visiting Standard Area 7:</p> <p>Staffing and Supervision:</p> <p><i>This standard delineates the requirements for staff education level, experience and ongoing training, reflective practices, supervisory levels and professional development processes needed to fulfill their responsibilities.</i></p>	<p>7.1. Program Staff</p> <p>7.2. Mental Health Consultant</p> <p>7.3. Staff Training</p> <p>7.4. Ongoing Professional Development</p> <p>7.5. Supervisor/Consultant Requirement</p> <p>7.6. Reflective Supervision</p> <p>7.7. Field Supervision</p> <p>7.8. Administrative Supervision</p>

<p>Home Visiting Standard Area 8:</p> <p>Community Engagement</p> <p><i>This standard specifies requirements for programs to partner with agencies and groups that may work with the same families to ensure collaboration and avoid duplication, and to work with community partners to ensure each family's access to the necessary continuum of family support services.</i></p>	<p>8.1. Collaboration</p> <hr/> <p>8.2. Ongoing participation in development of standards</p> <hr/> <p>8.3. Community – outreach</p>
<p>Home Visiting Standard Area 9:</p> <p>Data Management</p> <p><i>This standard delineates the requirements for entering and utilizing data for program planning, program improvement and accountability.</i></p>	<p>9.1. Program planning and evaluation</p> <hr/> <p>9.2. MN Data Practices Act</p> <hr/> <p>9.3. Documentation</p> <hr/> <p>9.4. Continuous Quality Improvement</p> <hr/> <p>9.5. Participation in trainings</p> <hr/> <p>9.5. Supervision sessions</p>