



# Maternal, Infant, and Early Childhood Home Visiting Program Updated State Plan

February 10, 2011

Health Resources and Services Administration  
Administration for Children and Families  
U.S. Department of Health and Human Services

# MIECHV Program

The legislated purposes of this program are:

- (1) to strengthen and improve the programs and activities carried out under Title V of the Social Security Act;
- (2) to improve coordination of services for at-risk communities; and
- (3) to identify and provide comprehensive services to improve outcomes for families who reside in at-risk communities.

# Timeline for FY 2010 State MIECHV Funding

Step 1: State applications in response to Funding Opportunity Announcement	Due July 9, 2010
Step 2: Supplemental Information Request: submission of the required statewide needs assessment	Due September 20, 2010
<b>Step 3: Supplemental Information Request: Updated State Plan</b>	<b>Due within 90-120 days of issuance</b>

# SIR for an Updated State Plan: Overview

## Sections:

1. Identification of the State's Targeted At-Risk Communities
2. Goals and Objectives
3. Selection of Proposed Models
4. Implementation Plan
5. Plan for Meeting Legislatively-Mandated Benchmarks

# SIR for an Updated State Plan: Overview

6. Plan for Administration of State HV Program
7. Plan for Continuous Quality Improvement
8. Technical Assistance Needs
9. Reporting Requirements

## Attachments:

- Memorandum of Concurrence
- Budget

# Section 1: Identification of Targeted At-Risk Communities

States must include:

- Final designation of at-risk community(ies) to be targeted by State HV Program
- Detailed needs and resources assessment for community(ies)
- Plan for coordination among existing programs/resources
- Assessment of local and State capacity to integrate the proposed home visiting services into an early childhood system
- A list of at-risk communities not selected for implementation in FY 2010

## Section 2: Goals and Objectives

States must include:

- Goals and objectives for Updated State Plan
- Strategies for integrating Updated State Plan into other early childhood programs/systems
- Logic model for State HV Program

# Section 3: Selection of Home Visiting Model(s)

- Proposed criteria for identifying home visiting models with evidence of effectiveness published in the Federal Register July 23<sup>rd</sup>, 2010, with comments due August 17, 2010
- Following analysis of 140 letters submitted, final criteria were developed, provided in Appendix A of the SIR. Responses to public comments in Appendix F.
- Models meeting criteria for evidence of effectiveness are specified in Appendix B and on the Home Visiting Evidence of Effectiveness Review (HomVEE) website (<http://www.acf.hhs.gov/programs/opre/homvee>)

## Section 3: Selection of Home Visiting Model(s)

- Selection of the model(s) should be in response to the needs of the targeted at-risk community(ies)

## Section 3: Selection of Home Visiting Model(s)

States may:

- Select a model(s) that meets criteria for evidence of effectiveness from Appendix B
- Propose another model not reviewed by HomVEE study
- Request reconsideration of an already-reviewed model
- Propose use of up to 25% of funds for a promising approach

## Section 3: Selection of Home Visiting Model(s)

- Within 45 days, States must secure approval by developer(s) to implement model(s) as proposed, including any acceptable adaptations
- For the MIECHV program, an acceptable adaptation is one determined by the developer not to alter the core components related to program impacts

## Section 3: Selection of Home Visiting Model(s)

States must:

- Describe how the model(s) meets need of community(ies) proposed
- Describe State's current and prior experience implementing model(s)
- Submit a plan for ensuring implementation with fidelity
- Discuss anticipated challenges to implementation

# Section 4: Implementation Plan

## States must:

- Submit a plan for implementation of State HV Program and for ongoing monitoring of the quality of implementation at the community, agency, and participant level
- Submit required assurances, including compliance with Maintenance of Effort
- NOTE: States are not required to conduct an evaluation, other than evaluation of promising approaches. Appendix C includes guidance on promising approaches.

# Maintenance of Effort (MOE)

- States must comply with the MOE requirement:
  - General funds
  - Evidence-based
  - Needs assessment
- MOE:
  - MOE baseline
  - Assurance
  - Audit

# Section 5: Meeting Legislatively-Mandated Benchmarks

- States must provide a plan for data collection for each of the 6 benchmark areas:
  1. Improved maternal and newborn health
  2. Prevention of child injuries, child abuse, neglect, or maltreatment, and reduction of emergency department visits
  3. Improvement in school readiness and achievement
  4. Reduction in crime or domestic violence
  5. Improvements in family economic self-sufficiency
  6. Improvements in the coordination and referrals for other community resources and supports

# Section 5: Meeting Legislatively-Mandated Benchmarks

## Major points:

- States must collect data on all 6 benchmark areas
- States must collect data for all constructs under each benchmark area
- To demonstrate improvements, the State must show improvement in at least half of the constructs under each benchmark area
- We recommend that programs utilize these and other appropriate data for continuous quality improvement
- At a later date, a template will be provided for States to report to HHS on benchmark progress at the 3- and 5-year points

# Section 5: Meeting Legislatively-Mandated Benchmarks

- The data collection plan must include:
  - proposed measures;
  - proposed definition of improvement;
  - proposed data collection and analysis plan; and
  - anticipated challenges in the reporting process and strategies for addressing these challenges
- Appendix D of the SIR provides detailed guidance for each of the 6 benchmark areas

# Section 6: Plan for Administration of State HV Program

The plan must include:

- A description of the administrative structure in place to support the program
- How the proposed program meets the legislative requirements around staffing and administration
- Efforts to coordinate the program with other State early childhood plans

## Section 7: Plan for Continuous Quality Improvement (CQI)

- CQI is an approach utilizing regular data collection and the application of changes that may lead to performance improvements
- The State must discuss a plan for CQI for their State HV Program
- Technical assistance will be provided as needed on CQI strategies

# Section 8: Technical Assistance Needs

- HHS intends to provide TA and training to States throughout the grant application process and implementation phase of the MIECHV Program
- States should provide a description of anticipated TA needs in the Updated State Plan
- For TA related to the development of the Updated State Plan, contact the HRSA Project Officer listed in Appendix E

# Section 9: Reporting Requirements

Ongoing annual reports should address:

- Program goals and objectives
- Promising program updates
- Implementation updates
- Progress toward meeting benchmarks
- CQI efforts
- Administration of State Program
- TA Needs

# Attachments

- Memorandum of Concurrence. Please note **THREE NEW REQUIRED** signoffs, in addition to those from FOA:
  - The child welfare agency administrator (Title IV-E and IV-B), if this agency is not also administering Title II of CAPTA;
  - The Child Care and Development Fund (CCDF) Administrator; and
  - The State Advisory Council on Early Childhood Education and Care authorized by the Head Start Act
- Budget
- Budget Narrative including MOE baseline expenditure

# Updated State Plan Review

- Reviewed by Federal project staff
- The review will consider:
  - Justification of targeted community(ies) at risk
  - How the model(s) addresses specific community needs
  - Plan for meeting benchmarks and collecting data
  - Overall feasibility of plan
  - Level of commitment and concurrence among required partners

## Next Steps

- Submit Updated State Plan within 90-120 days of issuance
- Submit online through HRSA's EHB at:  
<https://grants.hrsa.gov/webexternal/login.asp>

# Additional Resources: Appendices

- A: Criteria for Evidence-Based Model(s)
- B: Models That Meet The Criteria for Evidence Base
- C: Promising Approaches
- D: Specific Guidance Regarding Individual Benchmark Areas
- E: MIECHV Project Officers
- F: Response to Public Comments on FRN
- G: Glossary
- H: Audits

# Upcoming TA to States to Develop Updated State Plans

- Webinars:
  - February 22, 3-4:30 pm EST – Evidence review
  - February 24, 3-4:30 pm EST – Data systems
  - March 3, 3-4:30 pm EST – Benchmarks
  - Additional webinars will be announced on other topics related to sections of the SIR
- We also plan for other forums for learning and targeted and on-site technical assistance as needed and requested – more details to come!

# Contact Information

Contact your HRSA Project Officer,  
and/or [ayowell@hrsa.gov](mailto:ayowell@hrsa.gov) with any  
questions and comments.

Thank you!