

Affordable Care Act

**Maternal, Infant, Early Childhood
Home Visiting Program**

Public Health ICN

Overview



- Background
- Application Process
- 2010 Home Visiting Survey
- Needs Assessment Results
- What We Don't Know
- What We Think We Might Know
- Frequently Asked Questions



Background



- History Prior to the Legislation
- Purpose of the Funds
- Federal Home Visitation Advisory Group





Federal Application Process

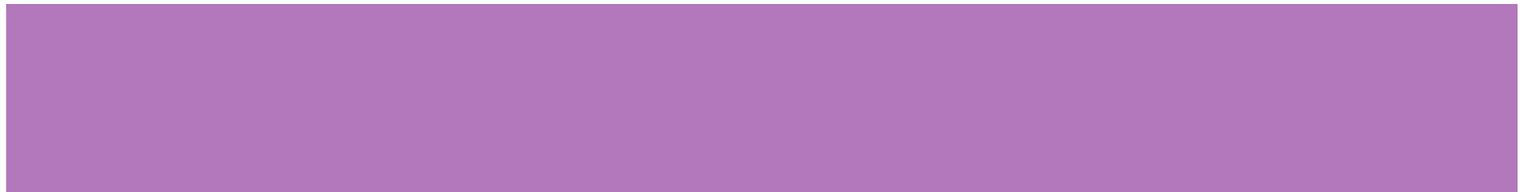
- **First Step:** Initial Application (Done!)
- **Second Step:** State Needs Assessment (Done!)
- **Third Step:** Updated State Plan



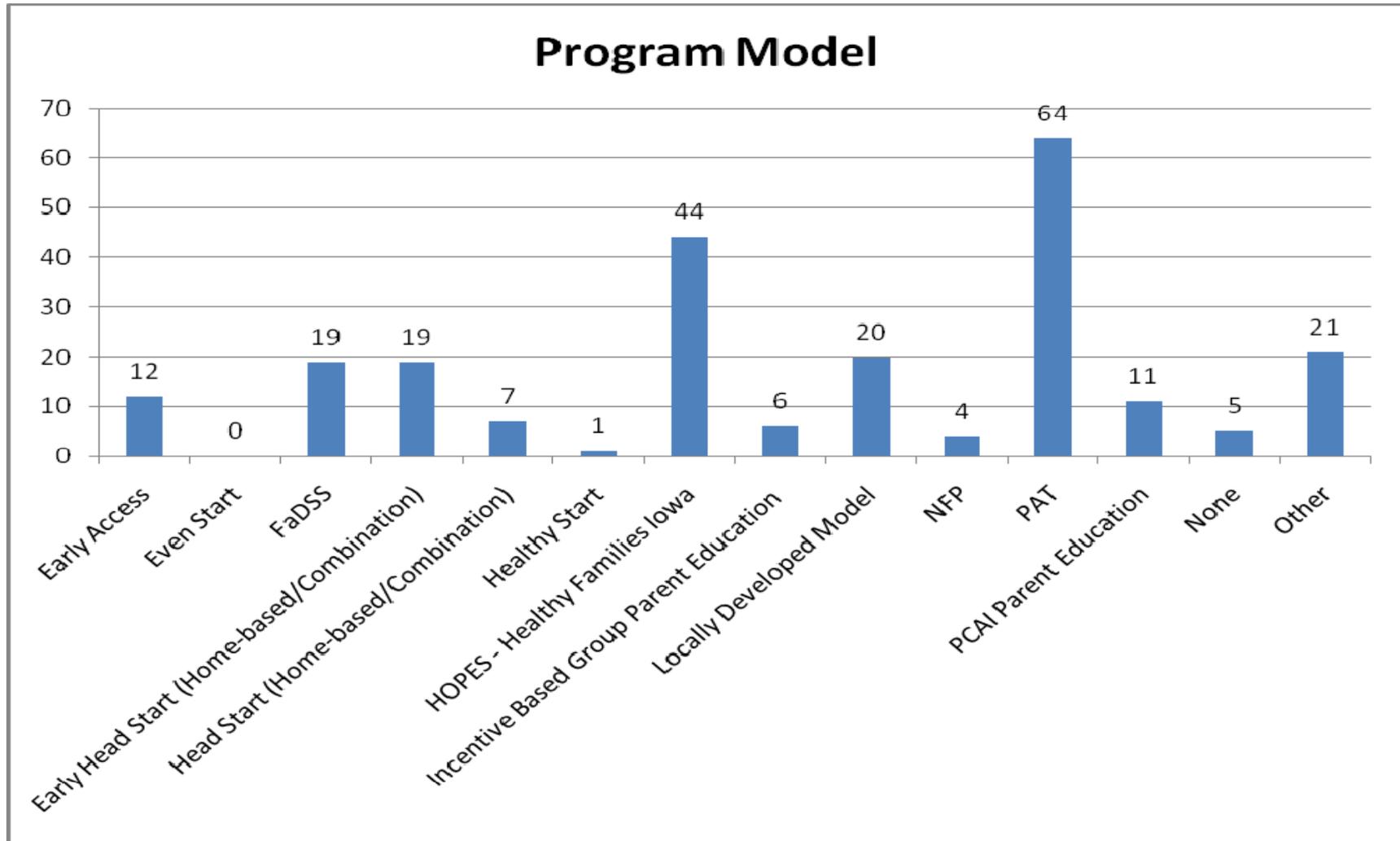


Needs Assessment Process

- Gather All Required Data
- Identify At-Risk Communities
- 2010 Home Visiting Survey
 - Attempted to gather information from all family support programs in Iowa (home visiting and group based)
 - 285 # of responses

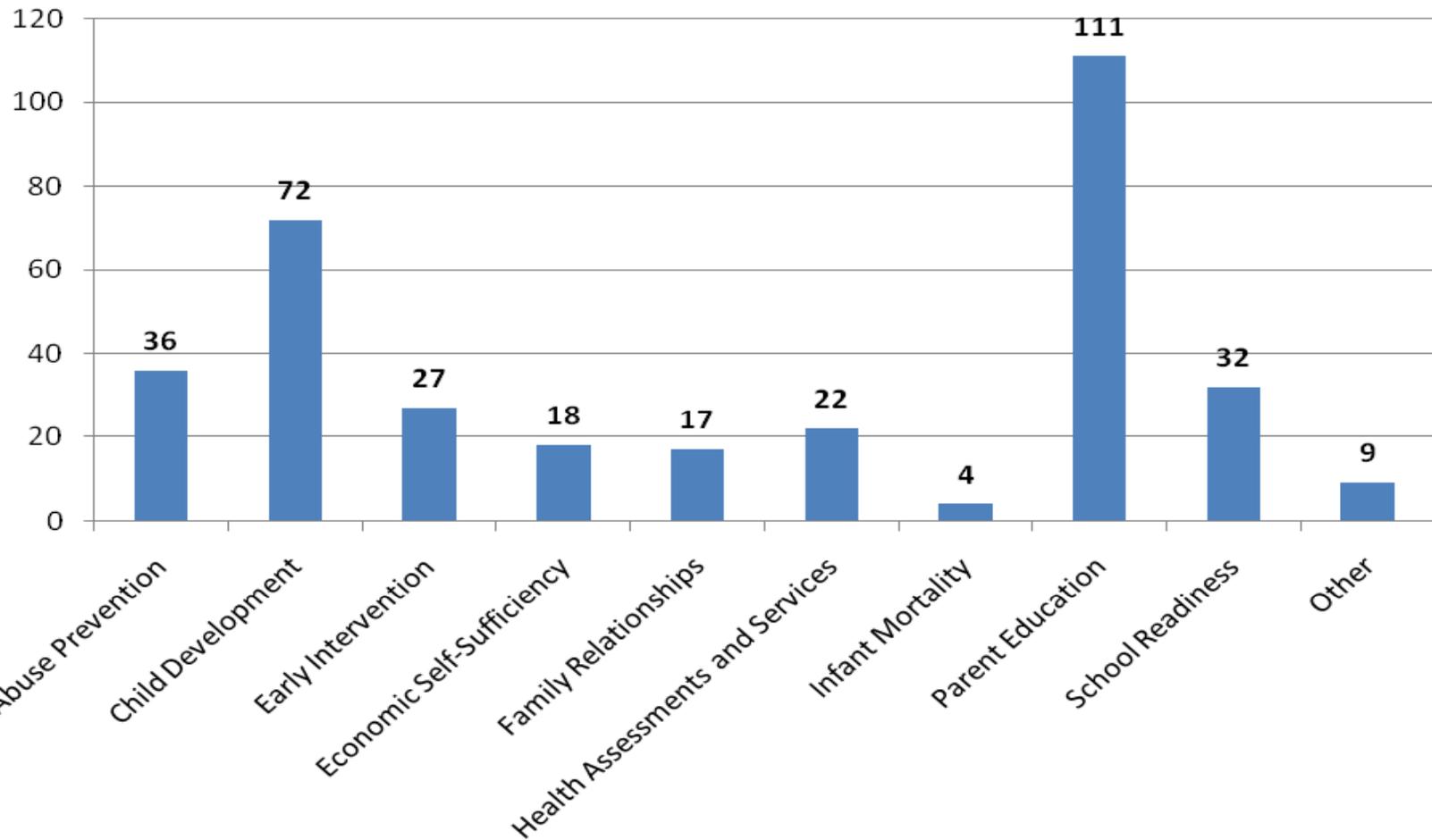


2010 Home Visiting Survey



2010 Home Visiting Survey

Primary Purpose of Home Visiting Program





Needs Assessment Priorities

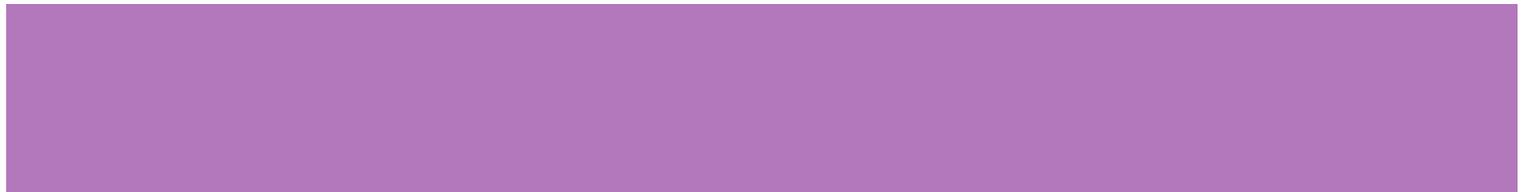
- Increase the number of families served by evidence-based home visiting programs
- Develop a statewide maternal, infant and early childhood home visiting data systems capabilities
- Reduce barriers to access to health care, mental health care, substance abuse treatment and counseling, and dental care for low income families



Needs Assessment Priorities



- Develop home visiting infrastructure with focus on quality and systems coordination
- Support healthy home environments and stable family relationships to protect families from domestic violence and child abuse and neglect



Needs Assessment Results

Indicators that were included in the calculation and selection of communities at risk include the following:

2009 Percent of Births Premature	2009 Infant Mortality Rate
2008 All People Poverty Census	2000 Child Poverty
2009 Confirmed Child Abuse and Neglect	2010 (June) Percent Unemployment
2006-2008 Binge Alcohol Prevalence	2009 High School Dropout Rate
2009 Juvenile Crime (0-18)	2009 Crime Rate per 1000
2009 Domestic Violence Rate	2009 Percent of Mothers with greater than High School Degree
2009 Smoking 3rd Trimester of Pregnancy Rates	2009 4th Grade Reading Percent Proficient
2009 Percent Low-birth Weight Infants	

At Risk Communities

Method One – Top 20:

Pottawattamie	Black Hawk	Clinton
Woodbury	Appanoose	Scott
Wapello	Buena Vista	Lee
Cerro Gordo	Des Moines	Hamilton
Marshall	Webster	*Decatur
Jefferson	Muscatine	Page
*Emmet	Montgomery	

**Only appear on one list*

At Risk Communities

Method Two – Top 20:

Lee	Appanoose_	Black Hawk
Clinton	Wapello	Woodbury
Des Moines	Montgomery	Cerro Gordo
Webster	Pottawattamie	Buena Vista
Scott	*Clarke	Hamilton
Page	Marshall	*Union
Muscatine	Jefferson	

**Only appear on one list*

Existing Home Visiting Capacity

Most in need based on capacity:

Linn

Clay

Muscatine

Polk

Clayton

Black Hawk

Scott

Cerro Gordo

Clinton

Des Moines

Wapello

Pottawattamie

Appanoose

O'Brien

Johnson

Lee

Wright

Decatur

Jefferson

Emmet

Counties that are underlined appear on all three lists



What We Don't Know

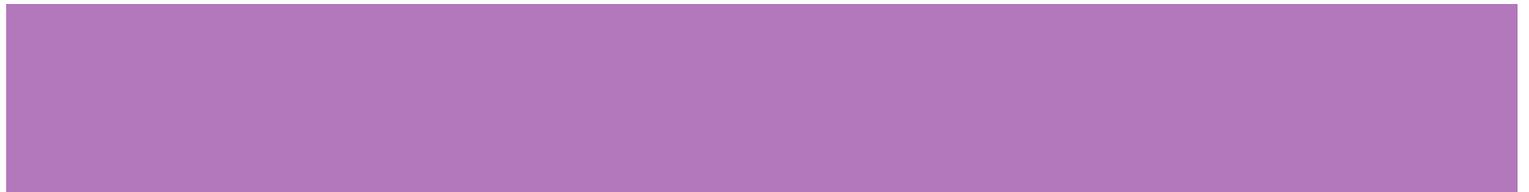
We don't know:

- 1) what model/s we will implement
- 2) the number of grants we will fund
- 3) when funding will be available
- 4) the application process for distributing the funds
- 5) the capacity to identify high risk populations not identified with county level data



What We Think We Might Know

- Initial available funding amount too low
- Eligible programs must meet federal definition of evidence based model
- Needs assessment will drive identification of targeted communities and model selection
- Anticipate three types of funding at the local level:
 - Planning grants
 - Implementation grants
 - Expansion grants





Frequently Asked Questions

Question 1:

Is every county eligible for funding?

Answer:

There are limitations based on the amount of available funding and the federal legislation. Federal guidance is specific that these funds must be targeted to “at-risk” communities.





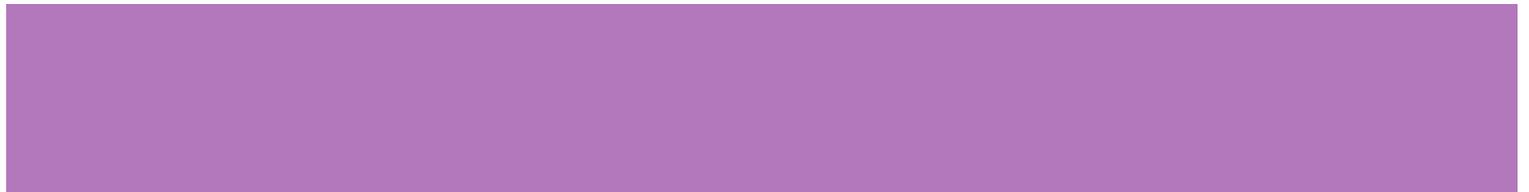
Frequently Asked Questions

Question 2:

Are only MCH programs allowed to apply for funding?

Answer:

No, it is not the intent of the federal legislation, nor the Department of Public Health, that eligible entities would be limited to only MCH agencies/programs.





Frequently Asked Questions

Question 3:

Will only one application per county be allowed?

Answer:

A decision has not been made, however, the ability to demonstrate collaboration and strong community partnerships will be key in a successful application.





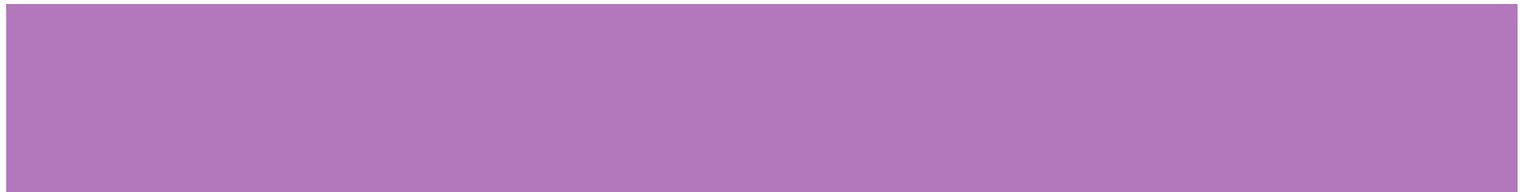
Frequently Asked Questions

Question 4:

What home visiting models are we looking at?

Answer:

What we know at this time is that evidence based home visitation programs are the priority. Up to 25 percent of the funds can be used to support innovative home visitation programs that do not meet the rigor of evidence but a portion of the funds must be then used for evaluation purposes.





Frequently Asked Questions

Question 5:

What TA will be available prior to and during the anticipated RFP?

Answer:

- 
- A Grant Writing ICN will be held prior to the release of the RFP (not specific to the HV grant.)
 - IDPH will provide detailed instructions to complete the RFP. IDPH anticipates providing a bidder's conference. The bidder's conference will review the information contained in the RFP.
 - At least two rounds of Q & A will be available to clarify RFP questions. No TA specific to the application will be available during the RFP process.



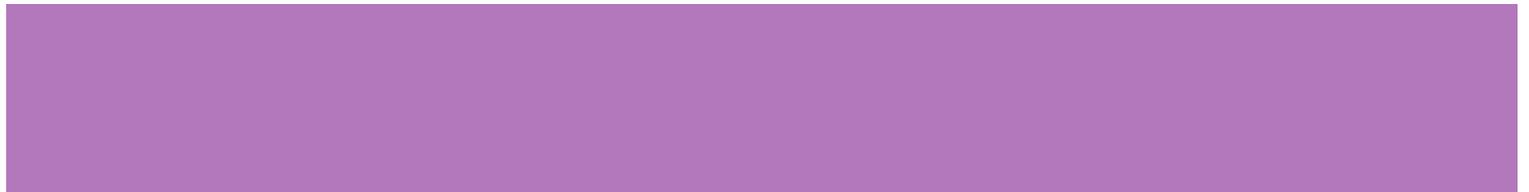
Frequently Asked Questions

Question 6:

What expertise is available at the state level?

Answer:

IDPH has hired a state home visitation program coordinator and a program assistant. Both are Bachelor's prepared with additional graduate studies completed. They have a combined 34 years of experience in delivering home visitation services.





Frequently Asked Questions

Question 7:

How do these funds interface with Early Childhood Iowa (Empowerment), Shared Visions, HOPES-HFI dollars?



Answer:

Currently the funds listed above work together to blend resources to expand or maintain services to families. The new funds can also be used to expand services to families with evidence based home visitation.





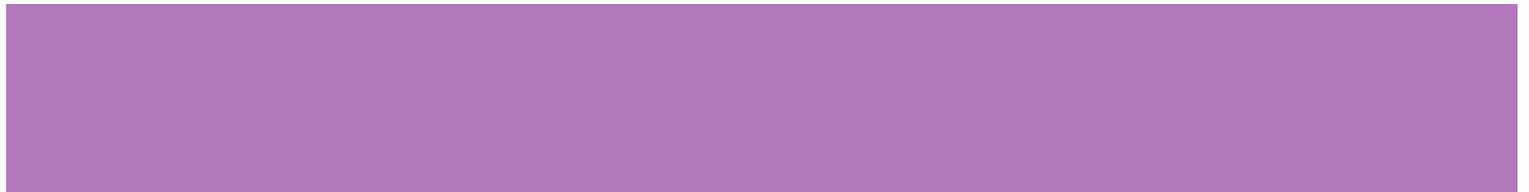
Frequently Asked Questions

Question 8:

*How does the new funding impact the home visitor programs currently implemented with Early Childhood Iowa (Empowerment) funding?
Is this a completely separate program?*

Answer:

The funds are administered separately at the state level, but may be used collaboratively at the local level.





Frequently Asked Questions

Question 9:

What will happen to home visitor programs in the rest of the counties throughout the state?

Answer:

Assuming that they are not expanded, they will still receive the benefit of the new funding stream. The new funding stream also has a focus on building state infrastructure to support quality home visitation.



Next Steps



- Provide at a minimum, quarterly updates
 - Develop a webpage on IDPH website
- Submit Supplemental Request for Information (Round 3)
- Develop community-based RFP
 - Notice of funds posted to IDPH website
 - Letters to LBOH in priority counties
- Explore capacity to identify high risk populations not evident by county level data



Resources

Link to Federal Legislation

http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_bills&docid=f:h3590enr.txt.pdf

Pew Home Visiting Campaign

http://www.pewcenteronthestates.org/initiatives_detail.aspx?initiativeID=52756

Pew Summary

http://www.pewcenteronthestates.org/uploadedFiles/wwwpewcenteronthestatesorg/Initiatives/Home_Visiting/HV_Health_Care_Reform_Summary_FINAL.pdf

Resources

Federal Guidance

<https://grants.hrsa.gov/webExternal/FundingOppDetails.asp?FundingCycleId=E24F384A-7290-49D0-A393-EED7F542B618&ViewMode=EU&GoBack=&PrintMode=&OnlineAvailabilityFlag=&pageNumber=&version=&NC=&PopUp>

Federal Proposed Criteria

<http://edocket.access.gpo.gov/2010/pdf/2010-18013.pdf>

Iowa Needs Assessment

http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/home_visiting_assessment.pdf



For More Information

Contact:

Janet Horras

State Home Visitation Program Coordinator

Public Health – Bureau of Family Health

E-mail: Janet.Horras@idph.iowa.gov

Phone: 515-954-0647 or

1-800-383-3826

