

Service Delivery Plan For Integrated Home Visitation Services In Orange County

Executive Summary

Final

September 24, 2001

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Submitted to:

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Executive Summary

This report proposes an explicit plan to create an integrated system of home visitation in Orange County. In formulating this plan, we drew wherever possible from evidence available in the literature on home visitation; unfortunately, the field offers little direction regarding integration across programs. To address this task, we started with eleven guiding principles. Working within these principles, the plan builds on the existing infrastructure in Orange County, as well as some of the future directions being considered by local service providers and agencies. There are two fundamental elements to the plan. First, it takes family resource centers (FRCs) as the basic underpinning of coordinated service delivery for home visitation. Second, the plan conceives of home visitation provided at three levels of intensity – low intensity, high intensity, and specialized home visitation programs – as a strategy to balance the needs of families of children 0-5 with the potentially high costs of home visitation.

We divide our service delivery plan into seven dimensions within three broad aims. This breakdown is designed to make the plan easier to conceptualize, but no dimension of the plan can be considered completely out of the context of the plan as a whole.

Designing an Integrating Structure for Home Visitation

Figure S.1 provides an overview of the major elements of our proposed structure for home visitation built into family resource centers. These elements constitute the first three dimensions around which our recommendations are organized:

Dimension 1: Strengthen Linkages Among the Primary Service Platforms

- Assign a Medi-Cal/Healthy-Families representative to each FRC as a link to health care providers
- Allot a school-readiness position to every FRC as a link to schools

Dimension 2: Manage Entry Into Home Visitation

- Identify/create a team within each FRC accountable for initial client contact
- Make this team also the contact point for programs outside the FRC
- Establish well-defined, systematic protocols to match clients with services
- Make cost consideration a vital element of client-service matching

Dimension 3: Triage Services

- Provide for low- and high-intensity home visitation services in each FRC
- Make the low-intensity program a part of the FRC referral team
- Constitute a multi-disciplinary team to staff the high-intensity program
- Use the FRC referral team to oversee referrals and client transfers to and from specialized home visitation programs outside FRCs

- Establish protocols for referrals and for confirmations of referral accommodation

Promoting Effective Service

A structure for organizing home visitation must be linked with a plan to assure that the system incorporates best practices, evaluates practices and responds to information on outcomes. These dimensions inform the next three sets of recommendations.

Dimension 4: Build in Evaluation of Program Success

- Expand measured outcomes to include variables describing the circumstances of children that home visitations are intended to impact
- Select outcomes capable of being directly influenced by service providers
- Include measured variables enabling cost/benefit analyses of home visitation services
- Convene define-it meetings involving home visitation providers and relevant funders to formulate these outcomes
- Relate measured outcomes to criteria delineating program and system success
- Provide timely reports summarizing outcomes to programs and funders
- Fund individual programs based on their achievement of outcomes to make each accountable for success

Dimension 5: Build in Information Collection and Storage

- Expand the OCERS database to incorporate home visitation outcome variables
- Provide for secure data exchange between OCERS and FRCs in reporting home visitation services coordinated through these centers
- Establish outcomes reports to FRCs and home visitation services
- Make provisions for gathering of data from home visitation programs outside FRCs and for reporting outcomes to these programs
- Develop plans for integrating information from involuntary home visitation programs managed by County agencies, such as Child Protective Services

Dimension 6: Incorporate Best Practices

- Establish work groups to develop protocols and related tools to handle referral and triage
- Explore technology options for referral tracking and other tasks common across programs

- Create a resource mapping for home visitation programs
- Establish regular meetings of home visitors to share outcomes and other information
- Conduct cross-training of home visitors

Closing Gaps in Coverage

Finally, the plan makes recommendations for closing gaps in service coverage.

Dimension 7: Reduce Gaps in Coverage of Home Visitation Programs

- Ensure availability of two levels of home visitation programs at each FRC
- Ascertain links of FRCs to special home visitation programs
- Create a “catchall” rest of county program to cover individuals living outside the service range of any FRC
- Establish protocols to identify future coverage gaps

Figure S.1 Proposed Structure For Home Visitation Services Linked With FRCs

