Subject: Maternal Infant Early Childhood Home Visitation Project
Coordinated Intake Referral System for Elgin Families

Policy: Determination of eligibility and assignment of MIECHV referrals follows a standard procedure to achieve best fit and equity.

Purpose: Assure that families are eligible, are in priority populations, and are assigned to a home visitation program that best matches their needs.

Procedure: CI utilizes a standard process to review eligibility and assign families to home visitation services.

1. CI maintains a current data set of specific Home Visit Program criteria such as service area, age restrictions, types of mothers served, language restrictions, and the like.
2. CI maintains current data via weekly Disposition Reports about the number of active clients in each MIECHV home visiting program and how many are currently pending for each.
3. To determine assignment, CI uses current flow chart/decision which provides consideration of several factors: priority population, address in Elgin IL, type of mother, age of mom/baby/child. If a family is eligible for more than one program, factors related to the programs are considered, including number of referrals already pending, number of slots still open, and restrictions for eligibility due to program model.
4. CI consults supervisor if there is any question or special issue.
5. CI sends monthly Transparency Report to all Home Visit Program Supervisors for review and input on how well the process for assignment is working.

FORMS: Home Visit Program Criteria, Eligibility and Assignment Flow Chart

Approved By: (Signature) [Signature]
Approved By: (Name & Title) Theresa Heaton, CI/CSD Manager
Date of Approval: 12/13/2013
Elgin Community Maternal Infant Early Childhood Home Visitation (MIECHV) Eligibility Criteria for Referral Families with an Elgin, Illinois Address

<table>
<thead>
<tr>
<th>Program</th>
<th>Pregnant Mom</th>
<th>Mom's Age</th>
<th>Child's Age</th>
<th>First Time mom</th>
<th>Second time mom</th>
<th>Third + mom</th>
<th>High Risk Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Focus Healthy Families</td>
<td>Yes</td>
<td>Mom must be 23 or younger</td>
<td>Yes—by 2 weeks old</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Kane Kares Nurse Family Partnership</td>
<td>Yes—up to 28 weeks—prefer 16 weeks or even earlier</td>
<td>Mom of any age</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>District U-46 Parents as Teachers</td>
<td>Yes</td>
<td>Mom of any age</td>
<td>Yes—less than 3 years old</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>VNA Healthy Families</td>
<td>Yes</td>
<td>Mom of any age</td>
<td>Yes—by two weeks old</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Families must meet one or more MIECHV priority population categories:

- First time mother/teen mothers – age 21 and under
- Low income families
- Low Education level- Did not complete HS
- Military families
- Mental/behavioral health – including history of substance use
- Tobacco/smoker in home
- History of abuse, neglect or DCFS involvement
- History of developmental delays
MIECHV HOME VISITATION REFERRAL PROCESS

Referring agency staff complete HV referral, sharing information about all home visit programs

Referring agency sends HV to KCHD Coordinated Intake (CI) – fax # 630-897-4845. If client chose to be in the referring agency program, it is documented on the form as a "keeper".

Did referrals arrive from Referring agency this week?

NO

KCHD CI notified referral coordinator by e-mail that no referrals arrived

YES

KCHD CI reviews & assigns referrals received to HV programs according to "keeper status", program criteria, and family demographic and risk factors

KCHD CI faxes referrals to HV agencies and sends email to supervisors to notify that referral(s) were just faxed

KCHD CI logs referrals in databases, and on waiting list if necessary.

MIECHV programs engages family and completes CIAT. HV Agency offers home visitation to clients only after randomization is completed

HV agency tracks if clients are or are not enrolled in HV program

KCHD CI sends disposition code request list of open referrals on second Friday of month***

Call HV agency supervisor for data on outcome/disposition

NO

KCHD CI send email reminder to HV agency asking for Disposition Report

YES

KCHD CI enters referral disposition data and completes monthly report

HV agency sends disposition codes for open referrals by third Friday of the month***

KCHD CI sends Referring Agencies a monthly report on number of referrals received as well as a feedback report (whether families enrolled or not) monthly on the 10th

*** If agencies have many slots, a weekly disposition report will be done in order to improve assignment among similar programs

Code Key***

(1) Enrolled – Client that has consented to receive home visits
(2) Refused – Client has been offered home visit services and decided not to accept them.
(3) Unable to locate RETIRED, DO NOT USE
(4) Other – Some other reason than those defined in the current referral disposition code list
(5) Still Pending – Those clients that the home visitor still plans to offer home visit services to
(6) Out of Service area – Clients who live outside the service area of the home visiting program
(7) Waiting list – Clients that the home visiting program cannot serve due to full capacity, but whom the home visiting agency plans to try to serve in the near future (and cannot be served by other home visit agencies)
(8) Agency has no record – Clients for whom the home visit program has no record of receiving a referral
(9) No agency to refer to – (home visit agencies will not use this code- it applies to the clients whom the referral coordinator has no home visit program that can accept the referral) due to eligibility, service area, summer closure, etc.
(10) Program Full – Client referral that is returned the HV Coordinator because the program is full and cannot visit and does not maintain a waiting list
(11) No disposition recorded = client for whom the home visit program has not yet reported the referral outcome/disposition. DO NOT USE—FOR CI ONLY
(12) MIHOPE Control Group = client is in the MIHOPE control group
(13) Unable to physically locate = client cannot be located despite attempted home visit
(14) Unable to reach by phone/mail = client whom the home visitor has not been able to reach by phone or mail in order to have a conversation about accepting home visits.

Revised 12/1/2013
Elgin MIECHV Referring & Home Visitation Partners

Elgin Family Referrals Sources

- Renz Addiction Center
- Elgin Housing Authority
- Aunt Martha’s Family Case Management
- Computer Systems Institute
- One Hope United Child Care
- Day One Network
- Elgin YWCA
- School District U-46
- Fox Valley Pregnancy
- KidCare Medical
- VNA Health Care Family Case Management/PIC
- Greater Elgin Family Care Center Family Case Management
- Elgin Family Physicians
- Harmony Health
- Easter Seals
- Sherman Hospital

Coordinated Intake
HomeVisitation@co.kane.il.us
630-208-5150

Kane County Health Department
High Risk Infant Program

VNA Health Care
Healthy Families

Kane County Health Department
Kane Kares - Nurse Family Partnership

Two Rivers Head Start Agency

School District U-46
Parents as Teachers

Elgin Family Home Visitation Services

12/16/2013