

IMPACT SURVEY

Home visiting programs nurture, coach, educate, offer encouragement, and refer families with infants and young children to other services to achieve a shared goal: building a safe, healthy, and stimulating environment for their child.

In April 2020, the Michigan Council for Maternal and Child Health (MCMCH) surveyed Michigan home visiting program administrators to understand better how home visiting programs are adapting and responding in the COVID-19 crisis. The survey was sent to 240 local home visiting programs across Michigan, with 52 responding. Most questions ask about home visiting program actions before and after the Stay Home, Stay Safe order was implemented in Michigan on March 16, 2020.



Multiple sources of federal, state and private funds support home visiting across our state. Models include:

- Early Head Start-Home Visiting (EHS-HV)
- Family Spirit
- Healthy Families America (HFA)
- Infant Mental Health (IMH)
- Maternal and Infant Health Program (MIHP)
- Nurse-Family Partnership (NFP)
- Parents as Teachers (PAT).

Staff available

Prior to the Stay Home, Stay Safe order, twothirds of staff were working solely on home visiting or providing supports to families enrolled in home visiting programs. Following the COVID-19 order, nearly half (25) reported that staff were working only on home visiting or supports to enrolled families.

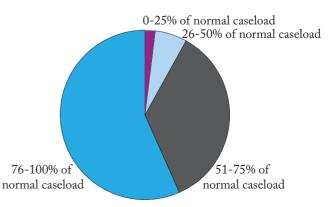
Virtual visits

Since the Stay Home, Stay Safe order, 88% (46) reported they had transitioned to virtual and telephone visits and are able to count and/or bill these as a visit. Others said they are checking in with families but not completing an interaction that could be billed or counted as a visit.

Engaging families

A majority of respondents said that they were able to continue to reach and serve most of the families enrolled in their home visiting program. (See pie chart.) Most home visiting programs are still enrolling new families. Of the total responding, 88% (46) said they are continuing to enroll new families.

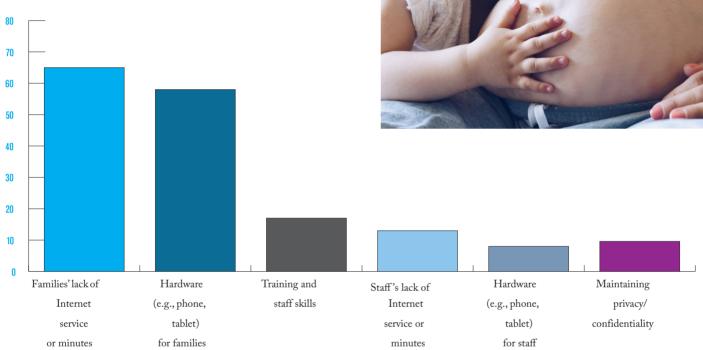
Percent of Normal Caseload of Families Maintained by Home Visiting Programs



Challenges

This is a challenging time for families and providers. As shown at right, the primary challenges reported were related to the digital divide. Other challenges were related to staff skills for delivering services virtually. Maintaining confidentiality and privacy for families (e.g., needing to find ways to engage with a mother when others are at home) was a challenge for about 10% of programs. These challenges are over and above those encountered when staff have been reassigned/repurposed for COVID-19 activities.





Recommendations

Research shows that home visiting works to support vulnerable families in times of need and stress. The COVID-19 crisis has left more families in need of concrete and emotional supports. The response of Michigan's home visiting programs demonstrates their commitment to service families in these times of crisis.

- Maintain and grow funding for Michigan's home visiting programs using federal, state, and private funds.
- During any public health crisis, pay for virtual visits at the same rate as in-person home visits.
- Permit some funds to be used for costs related to virtual visits such as hardware, Internet access, and materials for families.
- When new resources are available to direct to home visiting, focus on those families and communities at higher risk.



The Michigan Council for Maternal and Child Health (MCMCH) advocates for public policy that will improve maternal and child health and optimal development outcomes through prevention programs, access to care and adequate funding/reimbursement for providers. Since 1983 MCMCH has worked with administrators, legislators, policymakers, co-alitions, communities and advocates to shape and influence policy affecting women, infants, children and families.

For more info visit: www.mcmch.org