



# Iowa: Maternal, Infant, and Early Childhood Home Visiting Program

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The federal Maternal, Infant, and Early Childhood Home Visiting, or MIECHV program provides Iowa with the opportunity to expand evidence-based home visiting services to children and families in need, while also erecting an infrastructure to work across government agencies and create a statewide system of home visiting. MIECHV catalyzes the state's use of evidence-based home visiting programs, which—when paired with a newly created coordinated-intake system—helps families find high-quality programs that best meet their needs. Moreover, MIECHV funding has provided Iowa the ability to expand services, as well as the flexibility to be innovative in building its system, which would not have been possible otherwise.

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## Success and innovation

### The statewide coordinated intake system

Through a partnership with the Iowa Department of Education, the Iowa Department of Public Health, or IDPH, created the Statewide Coordinated Intake System for Family Support Services and Early Intervention. This system connects families with the home visiting model and other community services that will best meet their needs. Coordinated intake also helped the home visiting models in new communities identify families in need of assistance and support.

### Unique identifier

Iowa's Department of Education is working with IDPH to assign a unique identifier to families served through MIECHV. This identifier will allow the state to track progress of the child over time and across participation in different programs and schools. The memorandum of agreement between IDPH and Iowa Department of Education is currently being negotiated.



## Iowa MIECHV at a glance

### Total federal MIECHV funding:

\$1 million in formula grant funds and \$6.6 million in competitive grant funds

### Lead agency:

Iowa Department of Public Health, or IDPH

### Number of communities served:

18 communities

### MIECHV-funded home visiting models:

Early Head Start-Home Visiting, or EHS-HV; Healthy Families America, or HFA; and Nurse Family Partnership, or NFP

### Families served:

funding provides services for 822 families and, cumulatively, Iowa has served 1,315 families

## Iowa MIECHV at a glance

### **Additional funding for home visiting:**

state-based initiatives include Early Childhood Iowa's family-based initiatives: Shared Visions Parent Program, Healthy Families Iowa program, Family Development and Self Sufficiency, or FaDSS, program; Early Head Start grantees throughout the state provide home-based services in one-third of Iowa counties

### **Identified risks targeted by MIECHV:**

removing barriers to services for mental health, substance abuse, domestic violence, and dental care for low-income families and supporting healthy home environments and stable family relationships to protect children from child abuse and neglect

### Virtual home visitor system

To expand the reach of home visiting, the state hired a contractor to virtually replicate a home visit. The goal of this system is to reach expectant and new families who are above income eligibility for in-home services but who would still benefit from home visiting services. Families are asked to complete online assessments to evaluate their needs and then the software program provides them with a unique, individualized lesson plan to complete in their home. This system will help the state reach a broader population that would not have received home visiting services without the use of this technology.

### Competency assessment

In an effort to create a high-quality home visiting workforce, Iowa is in the process of creating a competency assessment with corresponding online learning modules for training and preparation. Family support workers must pass the assessment to qualify as a home visitor in the state.

### Workforce study

Iowa has completed the first phase of a home visiting workforce study examining the home visitor population across the state. The second phase will identify reasons families leave the home visiting program in order to determine what skills and methods home visitors can use to retain a family in the program.

### Web-based data collection system

The MIECHV data system was expanded to collect and report data for all home visiting programs in the state, not just the MIECHV-funded programs. The ability to collect data across all programs will provide a more accurate picture of how the statewide system of home visiting is impacting families and allow for data analysis at the programmatic and local levels.

### Monitoring child abuse in high-risk counties

Several of the high-risk counties targeted by the MIECHV funds had high rates of child abuse and neglect at the time of the original needs assessment. Iowa's data system has allowed the state to monitor rates of child abuse in these communities. In three particular counties, the state has been able to track a reduction in child abuse and neglect since the implementation of the MIECHV program. State administrators believe that home visiting is one strategy that has contributed to this decline.

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## Challenges

Implementation of a new federal program, particularly under a rapid timeline, was challenging for program administrators. Many communities were implementing new home visiting models and needed to create the infrastructure for the programs from scratch. Furthermore, choosing and establishing measurable data benchmarks, as mandated by the grant terms, was a complex process.

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## Looking ahead

### Reach more vulnerable children and families

Iowa strives to reach more vulnerable children and families. State administrators conducted data analysis to determine each county's service capacity and are utilizing this information to increase the number of available slots in counties with unmet need.

### Strengthen statewide coordinated intake system

The state is working to strengthen the Statewide Coordinated Intake System to ensure that families are receiving the appropriate evidence-based home visiting model for their needs.

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## Additional information

Iowa's MIECHV program on the Iowa Bureau of Family Health's website:  
[http://www.idph.state.ia.us/hpcdp/family\\_health\\_support.asp](http://www.idph.state.ia.us/hpcdp/family_health_support.asp)

Iowa's MIECHV Needs Assessment: [http://www.idph.state.ia.us/hpcdp/common/pdf/family\\_health/home\\_visiting\\_assessment.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/home_visiting_assessment.pdf)

For an updated Iowa MIECHV State Plan, please contact Janet Horras at [Janet.Horras@idph.iowa.gov](mailto:Janet.Horras@idph.iowa.gov)

Source: Interview with Janet Horras, state home visitation program director, Iowa Department of Public Health, September 2014; and Patricia (P.J.) West, state home visitation program manager, Iowa Department of Public Health, September 2014.

“MIECHV allowed us to take what seemed like dreams and make them become realities.”  
– Iowa home visitation program director

This profile was written as part of a larger study to identify how states are using Maternal, Infant, and Early Childhood Home Visiting, or MIECHV, funds to advance state home visiting systems. For a summary report and additional profiles about home visiting, visit [clasp.org](http://clasp.org) or [americanprogress.org](http://americanprogress.org).