

ADMINISTRATIVE PROTOCOL



Level:	DHP Division	Policy Number:	DHP-MIECHV 4
Applicability:	MIECHV	Date of Last Update:	
Effective Date:	12/13/2013	Approved	12/13/2013

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)	
Approved By: (Name & Title)	Theresa Heaton, CI/CSD Manager
Date of Approval:	12/13/2013

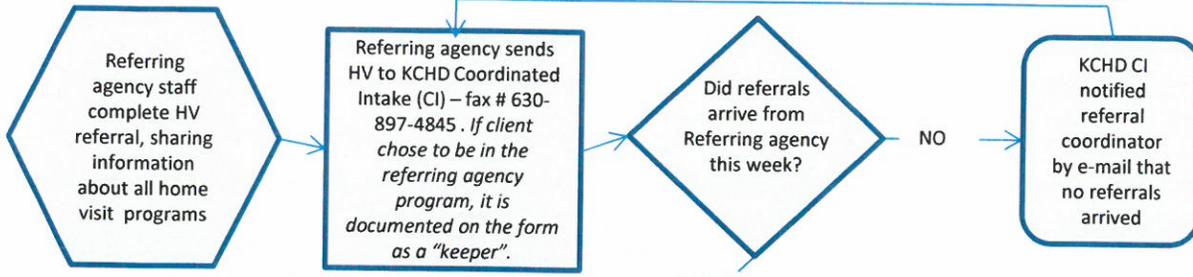
Elgin Community Maternal Infant Early Childhood Home Visitation (MIECHV) Eligibility Criteria for Referral Families with an Elgin, Illinois Address

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

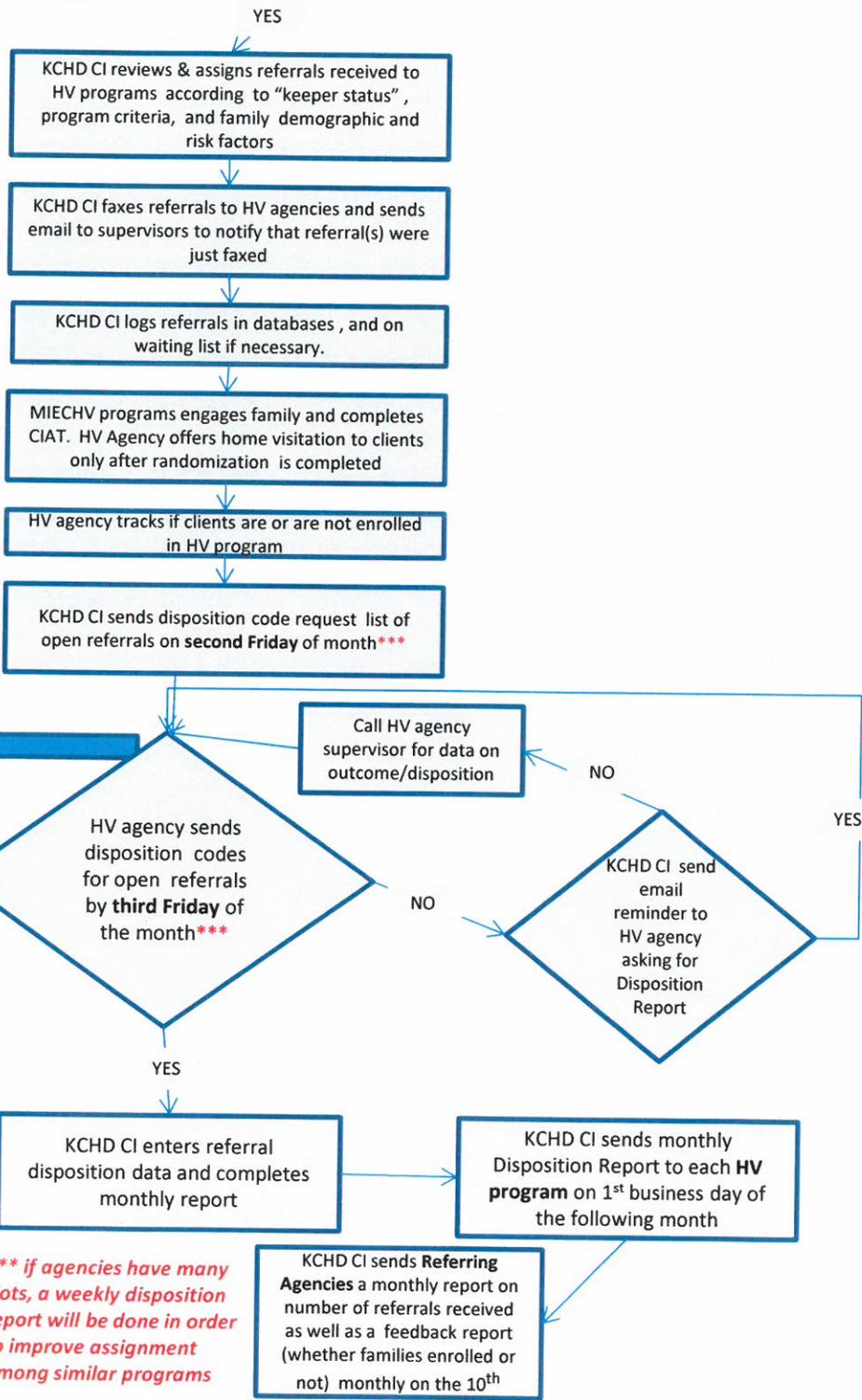
Families must meet one or more MIECHV priority population categories:

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

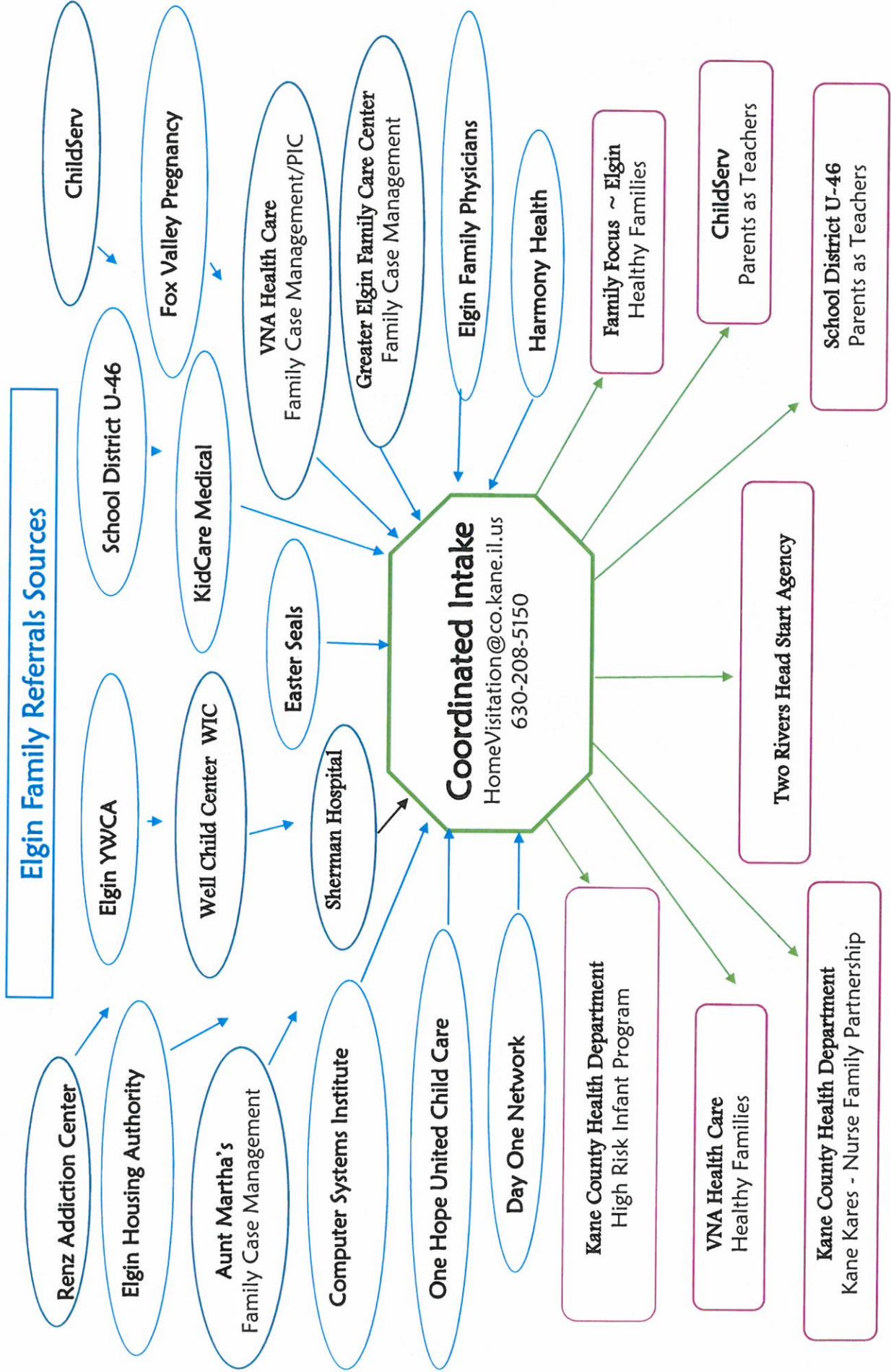
MIECHV HOME VISITATION REFERRAL PROCESS



- 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 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 not 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 Home Visitation Services

12/16/2013

