



Home Visiting in Vermont

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Vermont's Coordinated System of Home Visiting

Reach pregnant women and children **in their homes including rural and isolated families.**

Through **Children's Integrated Services**, Vermont has a **coordinated system of Home Visiting** to build Protective Factors and Improve Outcomes:

- **Children:** Improved development/child communication
- **Mothers:** Improved warm parenting/reduced hostile parenting, less birthing intervention, improved health, longer breastfeeding, improved parenting confidence/ self efficacy, improved use of services
- **Familial:** Improved home environment for safety, regularity and child development
- **Community:** fewer vulnerable children at school entry



Strong Families Vermont supports pregnant people and new parents through home visits delivered by trained professionals using a continuum of services. Home visitors partner with each family to set goals and promote optimal development, health and wellbeing.

Home visits also provide an opportunity for early screening and identification of potential challenges facing families, as well as connections to the broader array of Children's Integrated Services (CIS) and other local services and supports.

SUSTAINED HOME VISITING

Nurse Home Visiting Program

Registered nurses from home health agencies deliver a long-term, structured, evidence-based home visiting program for families including at least 25 visits during pregnancy up to age two. The program improves maternal and child health and family economic self-sufficiency, promotes optimal child development, prevents child abuse and neglect, and coordinates referrals to community resources.

Family Support Home Visiting Program

Trained professionals from CIS partner agencies deliver a long-term, evidence-informed home visiting program for families through regular visits up to age five. The program strengthens the parent-child relationship, builds social connections, prevents child abuse and neglect, and promotes optimal child development and school readiness.

RESPONSIVE HOME VISITS

Children's Integrated Services teams work together to connect families with Maternal and Child Health nurses and/or Family Support Workers to provide regular home visits in response to time-limited needs. These visits support and strengthen families' health, wellbeing, parenting skills, social connections and ability to address stressors.

UNIVERSAL HOME VISITS

Many communities in Vermont offer universal home visits through a range of community partners working together to ensure every family receives 1-3 visits during pregnancy and in the first months of parenting. These visits take many forms to provide a warm welcome and promote social connections, check in on the health and wellbeing of parents and baby, and share information about community resources to meet their needs.

Pathways from DULCE to Sustained Home Visiting

NOTE: families may enter home visiting from many different sources: OGBYN, WIC, daycare, pediatrician etc., BUT they all go through CIS

First Pediatric Visit
DULCE Family Specialist Contact

**Child Dev/
Parenting Svs
Needed**

Referral to Children's Integrated Services

**Child Dev/
Parenting Svs not
Needed**

Referrals & support through DULCE

**Client matches
Sustained HV
Criteria**

Begins Strong Families Sustained HV Program

**Client does not
match Sustained
HV Criteria**

Receives other CIS services as appropriate

**Client pregnant or
<6 wks postpartum**

Receives Nurse Sustained HV

**Child is >6 weeks
old**

Receives Family Support Sustained HV

The Current Status

5 pediatric offices have access to universal screening and connection to resources (DULCE)

- Varied funding streams

375 families served in Strong Families **Nurse Home Visiting**

- Federal MIECHV funding

Very few families served in Strong Families **Family Support Home Visiting**

- Some infrastructure established, no dedicated state funding

The AHS Proposal: Expand Home Visiting

EXPAND reach to 750 families total

- Estimate of all Medicaid families who need and want the services

Strong Families Nurse Home Visiting

- Expand current reach

Strong Families Family Support Home Visiting

- Establish services through community providers

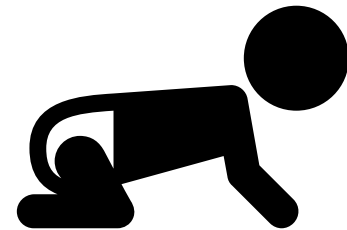
Cost per family	\$4,000
Total Medicaid births	~3,000/year
Uptake (program is voluntary)	25%
Total cost (750 families*\$4,000)	~\$3 million

Proposed Budget

MIECHV (federal)	\$1,300,000
Remaining need (Medicaid)	\$2,192,502
Total	\$3,492,502
FY '21 appropriation needed (State share of Medicaid)	\$1,000,000

30 years of research has shown that sustained home visiting is shown to:

- Improve maternal and child health;
- Promote parent-child interactions and improve social readiness;
- Reduce child maltreatment;
- Reduce family violence, juvenile delinquency and crime;
- Reduce maternal tobacco use;
- Reduce maternal behavioral impairment attributable to drug and alcohol abuse; and
- Increase family economic self-sufficiency.



Return on investment: \$1.75 to \$5.70 for every dollar spent

**\$1.75
to
\$5.70
saved
per \$1
invested**

“Cost-benefit analyses show that high quality home visiting programs offer returns on investment ranging from \$1.75 to \$5.70 for every dollar spent due to reduced costs of child protection, K-12 special education and grade retention, and criminal justice expenses.”

([NCSL](#))

Using the Strong Families Vermont model this would mean:

- Each Vermont child served would be an investment of \$4,000/year
- Each Vermont child would be served for 2 years, for a total investment of \$8,000 per child
- This investment would result in a lifetime savings of \$14,000.00 to \$45,600.00 for each child served

For additional return on investment information:

- [Pew](#) estimates an ROI of \$4.46 dollars per \$1 invested
- [Casey Family Programs](#) estimates an ROI of \$3.13 dollars per \$1 invested