



CDSS

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July 28, 2010

ALL COUNTY INFORMATION NOTICE NO. I-62-10

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHILD WELFARE PROGRAM MANAGERS

SUBJECT: THE NEW FEDERAL HOME VISITATION GRANT PROGRAM

REFERENCE: THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT OF 2010

The purpose of this All County Information Notice is to provide information to counties regarding the new federal home visitation grants.

The Patient Protection and Affordable Care Act of 2010, the health care reform package signed into law by President Obama on March 23, 2010, provides \$1.5 billion over five years in mandatory funding for a Home Visitation Grant Program for states. On June 10, 2010, the first Funding Opportunity Announcement was issued regarding the grants.

The focus of the home visitation program will be on the implementation of evidence-based, maternal, infant and early childhood voluntary home visiting programs. The programs will provide comprehensive and coordinated services to improve outcomes for pregnant women and for families with young children residing in identified at-risk communities. This new program will be administered through the Department of Health and Human Services, Health Resources Services Administration (HRSA). The HRSA is required to collaborate with the Administration for Children and Families (ACF) on the grants. Attached is an overview of the new grants prepared by HRSA and ACF.

The legislation specifies that the lead agency for the funds for each state shall be the state agency that has oversight for the federal Title V funds. The agency responsible for Title V funding in California is the California Department of Public Health. Their Maternal Child and Adolescent Health (MCAH) Division has taken the lead role in responding to the early childhood visitation program grant defined by this law. The MCAH Division has met a number of times with the California Department of Social

Services (CDSS) in the grant application process. The MCAH Division and CDSS have been working on research, analysis, and the compilation of data in preparation for each stage of the grant writing process.

The grant application process is a three step process. The first step for each state was the submittal of an application for funding that describes a plan for conducting a needs assessment and assessing the quality and capacity of existing programs. The application must also describe the process to be used to identify priority high-risk populations who are in need of home visiting services, and the process used for identifying benchmark areas. The deadline for the first application was July 9, 2010.

The two agencies are moving forward with conducting the required needs and capacity assessments, which is the second step in the application process, and has a deadline for submittal of September 1, 2010. As part of the needs and capacity assessments, a survey is being prepared in order to capture information at the local level about current unmet needs and existing community-based and prevention-focused programs. It will also capture information about local activities to prevent child abuse and neglect and other family resource services. In addition, a portion of the needs assessment must discuss the state's capacity for providing substance abuse treatment and counseling services.

The survey will be jointly completed by the county child welfare agency and the local MCAH Director. The MCAH Division has requested that each county Child Welfare Director designate an individual to work with each local MCAH Director to complete the survey for their county.

The third and final step in the application process will be the submittal of an updated state plan, which will be due in early 2011. Although we are still awaiting further guidance from the federal government on this final step, it requires the state to submit an updated state plan for addressing the needs identified in the assessment, and a proposed implementation plan of a model or models that meet the final criteria for assessing evidence of effectiveness. The criteria will be described in greater detail in a future Funding Opportunity Announcement, which will be released later in 2010.

For Further Information

The MCAH Division has launched a website to post pertinent information regarding the planning and implementation of this program. The MCAH Division plans to communicate on a regular basis, providing updates on the needs and capacity assessment, home visitation models, program and grant requirements, and other issues that may arise. The MCAH Division updates for stakeholders and partners regarding the new state grant program for home visitation will be posted to the web links below.

<http://www.cdph.ca.gov/programs/mcah/Pages/HVP-HomePage.aspx>

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Also, the MCAH Division has created a California Home Visitation mailbox where questions can be sent, information requested, and input provided:

CA-MCAH-HomeVisitation@cdph.ca.gov

As more specific information and instructions are made available by the federal government, future letters may be released. In addition, the MCAH Division web site will also provide updated information about the grants as it becomes available.

If you have any questions regarding this letter, please contact Lee Ann Kelly, Assistant Chief of the Office of Child Abuse Prevention at (916) 651-6960 or lkelly@dss.ca.gov.

Sincerely,

Original Document Signed By:

LINNÉ STOUT, Chief
Child Protection and Family Support Branch

Attachments

The Maternal, Infant, and Early Childhood Home Visiting Program

On March 23, 2010, the Patient Protection and Affordable Care Act became law. Included in this new law is a provision for the creation of a *Maternal, Infant, and Early Childhood Home Visiting Program*. The purpose of this program is to fund States to provide evidence-based home visitation services to improve outcomes for children and families who reside in at risk communities.

The Health Resources and Services Administration (HRSA) and the Administration on Children and Families (ACF) look forward to partnering with States and others to foster effective, well-coordinated home visiting programs for at-risk families. The goal of these efforts is to promote early childhood health and development and, ultimately, to improve outcomes and opportunities for children and families. The home visiting program is meant to be a support to at risk families with children. Home visitors are often from the community they serve and have background and experience in the healthy development of children.

Under the *Maternal, Infant, and Early Childhood Home Visiting Program*, grants will be made to states to deliver effective evidence-based early childhood home visiting programs in communities states identify as being at risk. Based on a careful review of available research evidence, HRSA and ACF will develop evidence-based criteria for identifying home visiting models that have been demonstrated to improve outcomes for families. The program models states choose to implement must also be linked to benchmark areas of improvement at the state level.

Our two agencies are committed to making the Maternal, Infant and Early Childhood Home Visiting Program a success on the ground and an example of how evidence-based policy and effective collaboration – among federal agencies, between states and the Federal government, and across local programs – can improve outcomes. At the Federal level, policy and program decisions will be made jointly between HRSA and ACF. And, it is our expectation that states ensure collaboration among child-serving entities and programs as they prepare for and develop home visiting service systems.

The first step is for ACF and HRSA to develop and issue a funding opportunity announcement to address the needs assessment required by the statute. As states conduct their needs assessments, we will develop program guidance that answer questions about how grants can be used to conduct early childhood home visitation programs that address needs identified by the assessment.

In anticipation of the funding announcement for the needs assessment, we suggest that states begin preparing by:

- Reading the text of the Patient Protection and Affordable Care Act, available on-line at: http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_bills&docid=f:h3590enr.txt.pdf pages 216-225.

- Gathering the information identified in Section 511(b) of the law.
- Thinking about how agencies in your state can work together to develop a needs assessment that coordinates the Title V needs assessment, the community-wide strategic planning and needs assessment under the Head Start Act, and the inventory of unmet needs and current community-based and prevention-focused activities under the Community Based Child Abuse Prevention Program.

HRSA and ACF are aware that states must successfully complete a home visiting needs assessment in order to receive funding in Fiscal Year 2011 through the Maternal and Child Health Block Grant. We will work closely with states and jurisdictions to assure that the needs assessment meets the timeline listed in the legislation.

We are committed to informing all stakeholders and the public about decisions being made and, as appropriate, options being considered. We believe that for this program to be effective, we must be partners with states, home visitation program developers, consumers and other stakeholders.

If you have ideas concerning implementation of this important new program, we would like to hear them. Please send your comments to Audrey Yowell in HRSA at ayowell@hrsa.gov and Moushumi Beltangady in ACF at moushumi.beltangady@acf.hhs.gov.