Understanding the South Carolina Home Visiting Needs Assessment



HOUSEKEEPING



Use the "chat" feature to ask questions



Webinar recording will be available in 24 hours



A link to the recording will be emailed to all registered participants



Presenters



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Today's Agenda

- Introduction of Home Visiting + Needs
 Assessment Process
- 2020 SC Home Visiting Needs Assessment: Key Findings
- 2020 SC Home Visiting Stakeholder Survey: Key Findings

Next Steps: Applying the Findings to Your Work

Q & A with presenters



Goals for Today



2

3

Provide background and context to the 2020 Needs Assessment process

Present findings and information relevant to your work

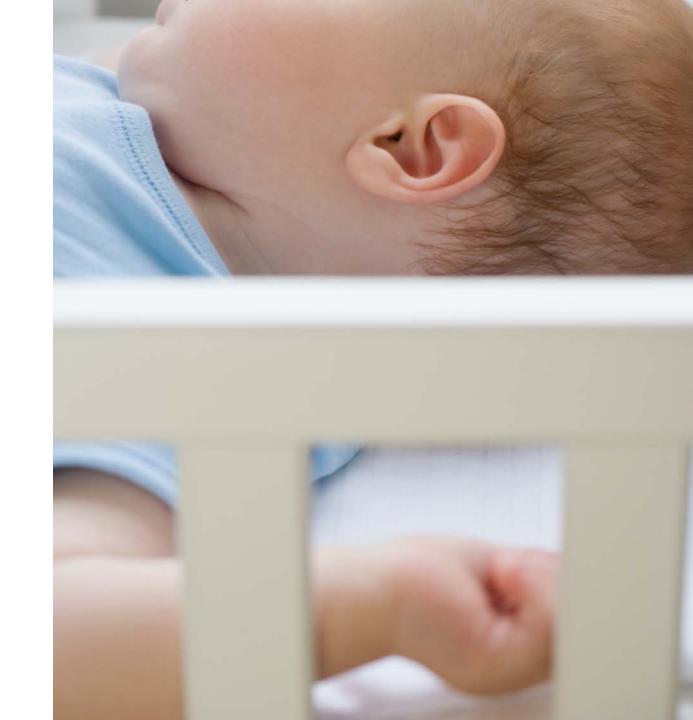
Explore implications these findings have for home visiting in South Carolina



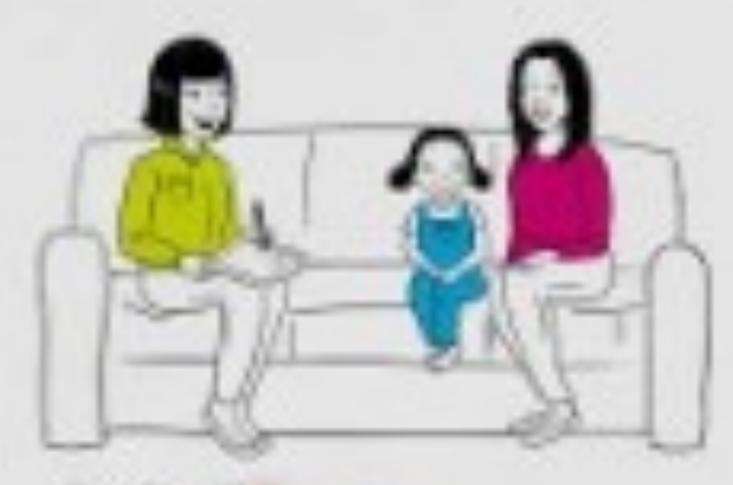
Introduction to Home Visiting & the Needs Assessment Process

Bipartisan Budget Act of 2018

- Extended appropriated federal funding for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program
- Requirement to conduct statewide home visiting needs assessment by October 1, 2020







Mactin with

Home Visiting Supports Prevention





Home visiting improves child well-being through the coordination and delivery of health, child development, early learning, child abuse and neglect prevention, and family support services.

Strengthening the home visiting infrastructure decreases risk factors and increases protective factors for children at risk for child abuse and neglect.



Needs Assessment Partners











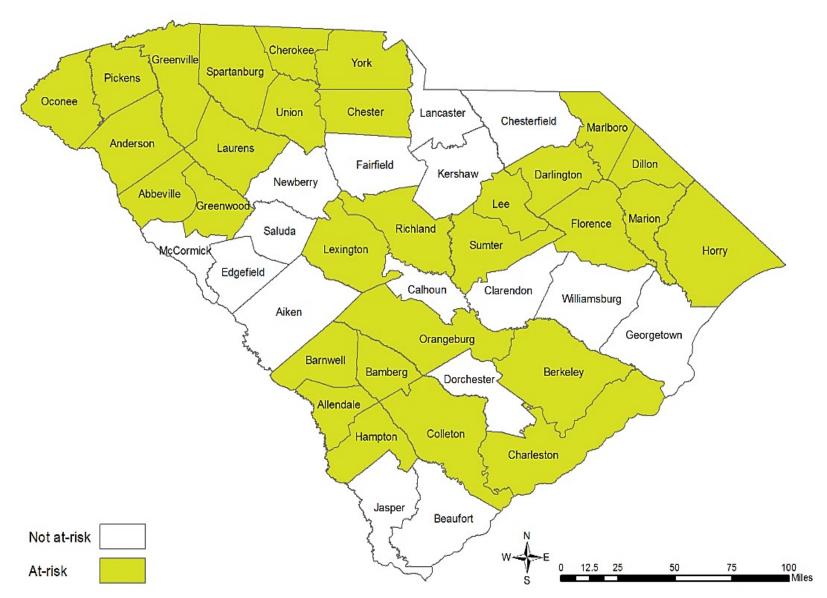




2020 South Carolina Home Visiting Needs Assessment

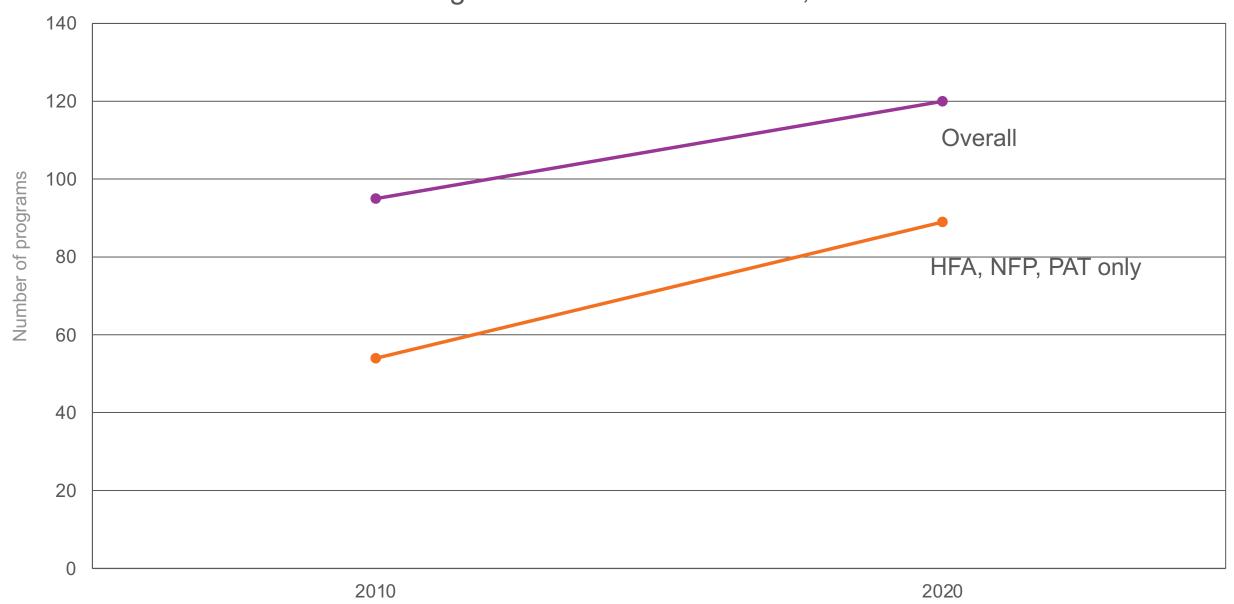
Key Findings

2010 Needs Assessment





Home Visiting Growth in South Carolina, 2010-2020



2020 Needs Assessment



Identify communities with concentrations of defined risk factors



Assess the quality and capacity of home visiting services in the state



Identifying Communities with Concentrations of Risk

Socioeconomic Status

Adverse Perinatal Outcomes

Substance Use Disorder

Crime

Child Maltreatment



Risk of current child abuse

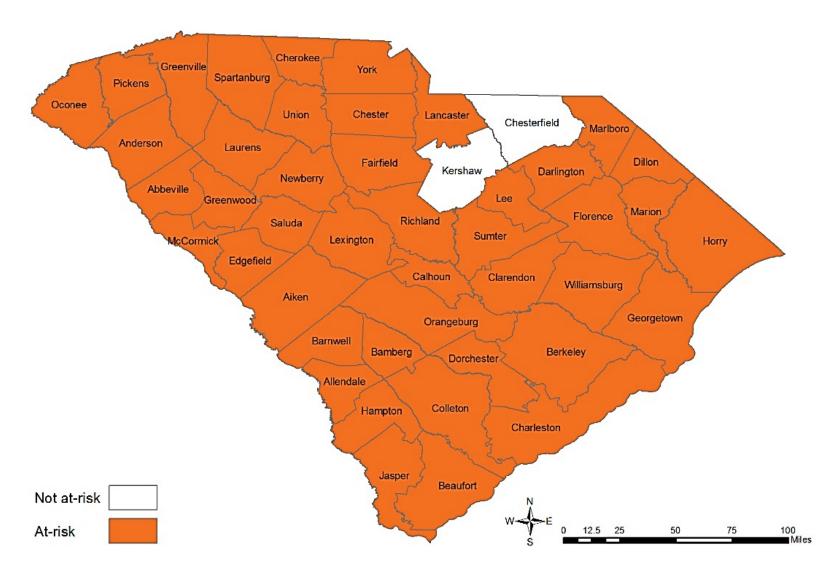
Very high or high risk of child abuse

Some elevated risk of child abuse

Low risk for child abuse



Identifying Communities with Concentrations of Risk











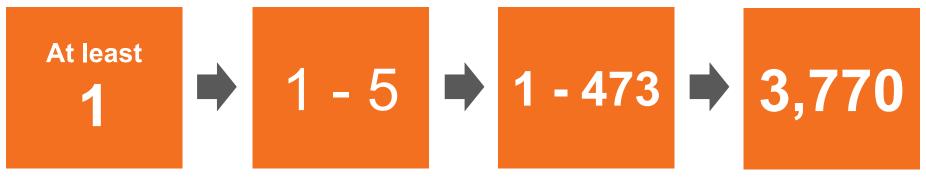












Home visiting model in every SC county

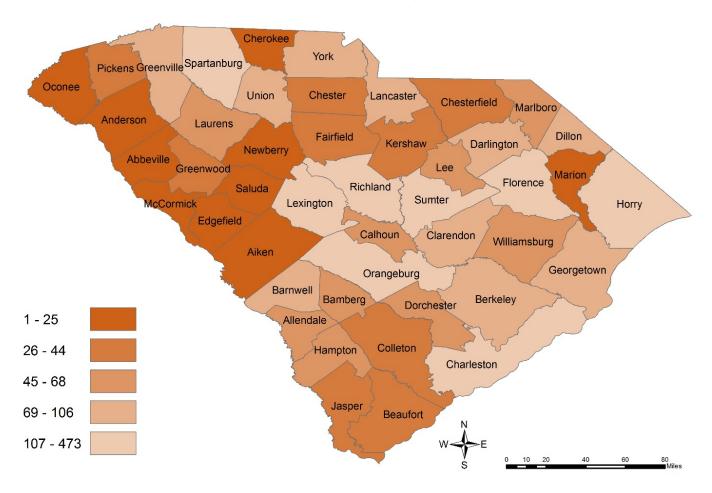
Range of models per SC county

Range of clients per SC county

Total number of clients served annually

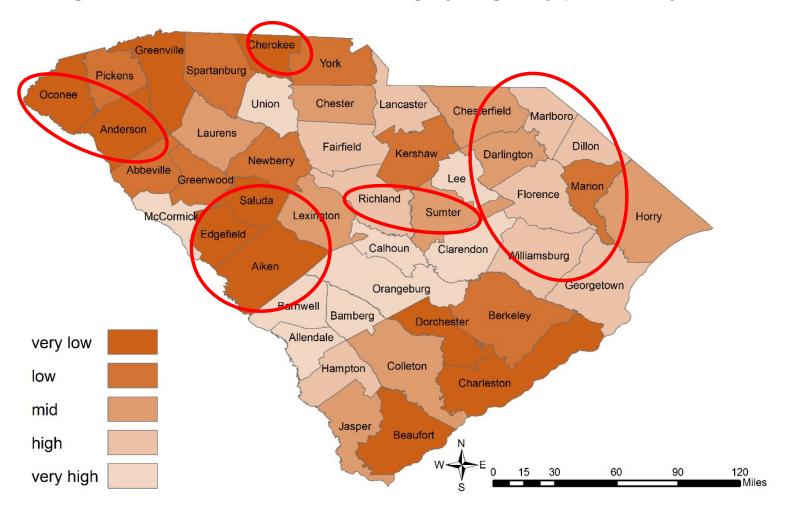


Caregiver Enrollment in Home Visiting by County 2020 Estimate





Caregiver Enrollment in Home Visiting by Eligibility per County 2020 Estimate





2020 South Carolina Home Visiting Survey

Key Findings

Statewide Home Visiting Stakeholder Survey

Who Was Surveyed	Frequency	%
Home visiting program administrator/manager/supervisor	40	38.83%
State agency or organization	27	26.21%
Home visitor	19	18.45%
Local nonprofit or advocacy organization	9	8.74%
Public health professional	2	1.94%
Social or other support service provider (social worker, community health worker, etc.)	2	1.94%
Other	2	1.94%
K-12 educator or other school staff	1	1%
Home visiting participant	1	1%

Model	Frequency
Parents as Teachers	28
Nurse-Family Partnership	18
Other*	9
Healthy Families America	7
Parent-Child+	3
Early Head State (Home-Based)	3
Healthy Start	2
Early Steps to School Success	1



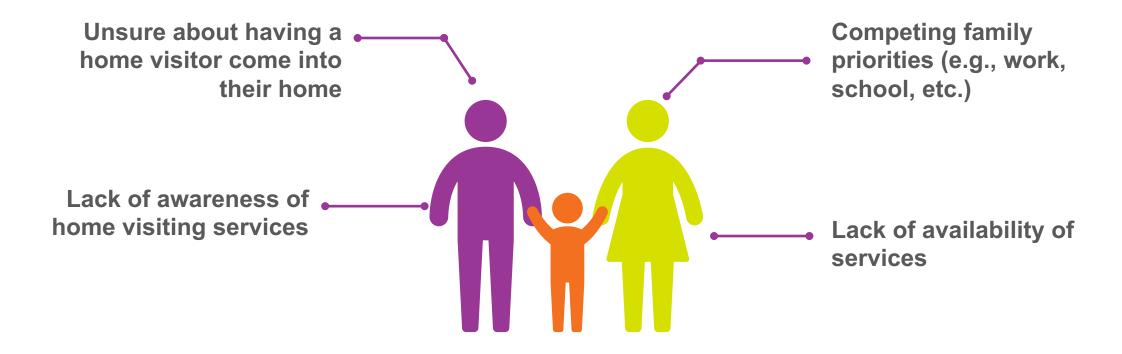


Families' Perspectives: Interviews & Focus Groups

34 Interviews and 6 Focus Groups



Barriers Families Face Accessing Home Visiting Services





Families Face Many Challenges and Have Continued Need

Hardest to Access

- Transportation
- Basic needs
- Childcare
- Health care

Major Unmet Needs

- Transportation*
- Childcare*
- Mental Health*
- Job needs*
- Basic needs

*low community capacity to address

Barriers in Accessing Services

- Lack of transportation
- Lack of availability of services
- Lack of awareness of available services
- Competing family priorities

More items identified as "major problems" in **rura** areas compared to urban



Barriers Home Visiting Programs Face in Addressing Service Gaps or Providing Services





Barriers Home Visiting Programs Face in Addressing Service Gaps or Providing Services

perceive the need for home visiting 50% perceive the need for home visiting services exceeds their home visiting program's capacity

470/0 say their private waiting list

say their program does not have a



There is a perception that there are "a lot" of home visiting programs in our geographic service areas; however, with home visiting programs requiring prenatal enrollment or enrollment shortly after birth, there are few to no home visiting resources available for many families who would benefit from home visiting after children are 1 month old.



FEEDBACK FROM SURVEY PARTICIPANT



Ways to Improve Outreach to Families

1 Funds

Universal home visiting and care coordination

2 Promotion and education

6 Community health workers

Hiring qualified minority or bilingual staff

7 Statewide referral system

4 Virtual visits



Perspectives on Community Readiness and Capacity to Implement Home Visiting

Communities have low levels of infrastructure and leadership prioritization, but high levels of buy-in



Resources Needed for Expansion of Home Visiting Programs

1 Local care coordination

More transportation options

Increase recognition and awareness of home visiting

6 Virtual home visiting options

Workforce redevelopment and support, including salaries

7 Increased funding for home visiting programs

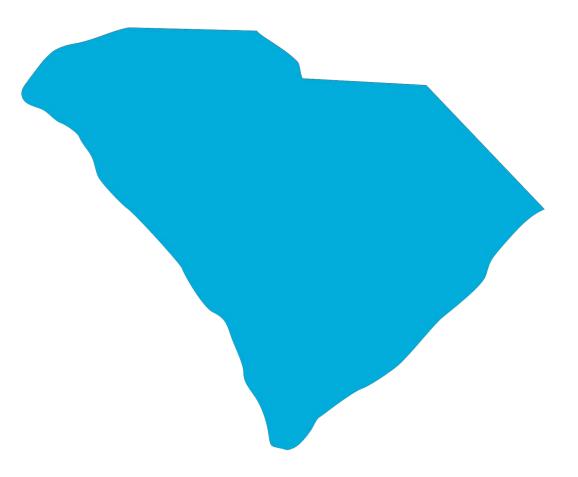
A range of models to meet diverse needs of families



Overall Report Findings

Conclusions

- Home visiting programs provide a service that is much needed by South Carolina families
- There are high levels of buy-in at the community level
- Home visitors in SC are largely representative of the populations they serve, indicating a commitment to health equity across programs







Opportunities

- Only 10% of families in need in at-risk counties are receiving home visiting services
- Infrastructure and leadership prioritization for home visiting programs are low
- Meeting families' needs requires addressing deficiencies in the state's socio-economic infrastructure



Identified Home Visiting Needs in SC

Reaching more rural families

Coordinating services and referrals while providing a range of services



Addressing the social determinants of health

Raising awareness



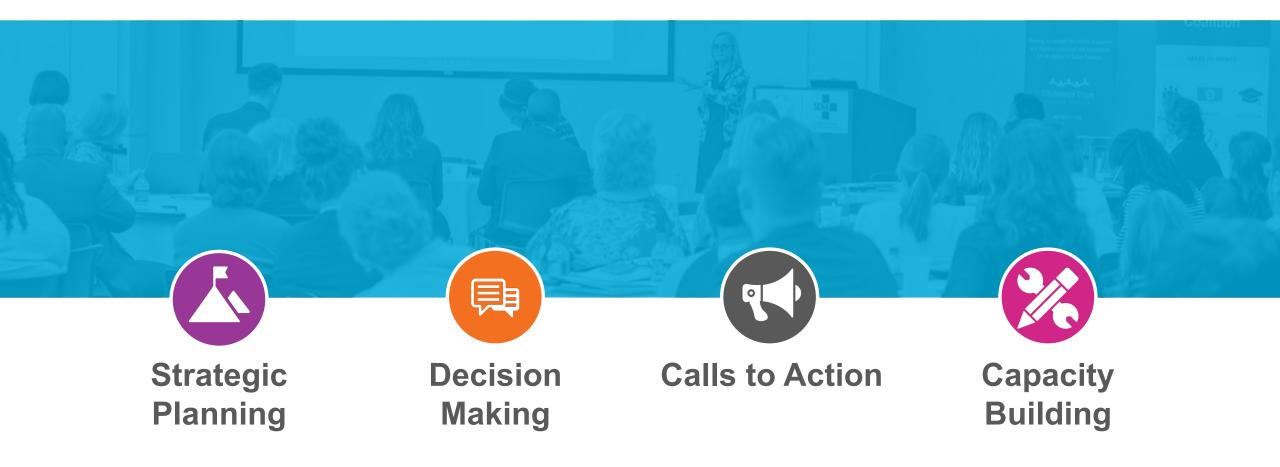
Applying the Findings to Your Work



What does this mean for you?



Innovative Leadership in Prevention





About Children's Trust

Children's Trust of South Carolina is the statewide organization focused on the prevention of child abuse and neglect. We provide funding, resources and training to help local program partners build strong families and positive childhoods.

Building a Better South Carolina



Our Mission

Strengthening families, organizations and communities to prevent child abuse and neglect.



Our Vision

A South Carolina where every child thrives.



How We Prevent Abuse and Neglect





Potential Uses for Organizations and Collaboratives



Home Visiting Consortium

Concerted planning on workforce development, data collection & advocacy



Thriving Families

Data to inform partner engagement and strengthen systemic approaches



Birth Outcomes Initiative

Identifying interventions to support system outcomes



Early Childhood Advisory Council

Coordinate outcomes and data with other state needs assessments and plans



Potential Uses



Local system and programmatic development

Partner engagement, advocacy, planning.



Grant Writing and Funding Opportunities



Communication and **Messaging**

Platform and material development





Questions and Answers



Final Thoughts

Seek opportunities to expand discussions

Advocate and strategically plan for expanded home visiting and early childhood initiatives

Connect with the SC Home Visiting Consortium

scHomeVisiting.org



Thank you

