

Demystifying “Home Visiting” for Legal Aid, Food Banks, & Community Partners



Welcome!

Agenda

- Intro and Icebreaker: What comes to mind when you think of the term “home visiting”? (Mentimeter Activity)
- LABBN/Consortium Background
- Overview of home visiting services and the support provided to families
- Legal considerations
- Community panel: hear directly from home visitors, their clients, and supervisors

LA Best Babies Network and Consortium Background

- **LA Best Babies Network**
 - We are an oversight entity for First 5 LA and DPH-funded home visiting programs such as Healthy Families America, Parents as Teachers, and Welcome Baby. Our role includes providing infrastructure, training, and program support for home visiting staff across LA County.
 - Key Areas of Support:
 - Network Oversight & Support
 - Communications & Outreach
 - Data & Evaluation
 - Policy & Advocacy
 - Training & Technical Assistance
- **LA County Perinatal & Early Childhood Home Visitation Consortium**
 - A network of 60+ organizations coordinating, measuring, and advocating for quality home visiting in LA.
 - Includes county agencies, nonprofits, advocacy groups, and funders.
 - Backbone Support: LA Best Babies Network
 - Funders: First 5 LA & LA Partnership for Early Childhood Investment

Home Visiting: A Multi- Disciplinary, Family Centered Support Strategy

- What is home visiting?
 - Home visiting as a multi-disciplinary, **family-centered** support strategy with services delivered by trained community professionals in the home that is offered on a voluntary basis to pregnant women and/or families with children through the age of 5.
- Home visiting programs are designed to empower parents to achieve specific outcomes which may include:
 - Healthy pregnancy, birth and infancy
 - Optimal infant/child development
 - School readiness
 - Prevention of adverse childhood experiences
 - Promote family well-being
- Laws:
 - Community-Based Perinatal System, Health and Safety Code § § 123475 *et. seq.*
 - CalWORKs Home Visiting Program, Welfare & Institutions Code § § 11330.6 *et. seq.*

- Our work is grounded in strengthening protective factors for families and communities—parental resilience, knowledge of parenting, social and emotional competence of children, social connection, and concrete support in times of need—which are known to mitigate the risks of child abuse.
- Staff are trained using a curriculum that supports children and families, referring families to community-based services and supports where possible while still prioritizing the health and safety of children.
- Staff typically come from the community that they serve. Staff are trained to be culturally-competent and trauma informed.
- See Welf. & Inst. Code 11330.6 (a)(2), 11330.7 (d)



Staff receive in-depth training from leading experts on over 20 topics relevant to maternal and child health and the home visiting field

LA Best Babies Network Training Catalog

Staff provide comprehensive, in-depth training from leading experts on child health and the home visiting field. By the end of the cohort, staff receive an opportunity to support parents and families during pregnancy and beyond, the way we provide.

Training Objectives

Outline the five domains of development assessed by the ASQ-3
Enhance participants' skills related to the administration and scoring of the ASQ-3 screening tool
Enhance participants' skills in sharing screening results with parents
Explain how cultural practices influence development

Enhance participants' skills related to the administration and scoring of the ASQ-SE2 screening tool
Enhance participants' skills in sharing screening results with parents
Demonstrate how to administer the ASQ-SE2 and engage with parents during a parent conference

Share theories and research on bonding and attachment as it relates to the growth and development of infants
Define attachment styles and how parents' reflective and attuned responsiveness supports optimal developmental outcomes for children
Explain how culture influences the attachment process

Explain the relationship between early attachment and brain development
Categorize the brain developmental milestones of babies from birth through nine months of age
Enhance participants' skills on how to share child development information with clients

Define who is considered a mandated reporter and review the California Penal Code
Identify warning signs of potential child abuse and explain how to file a report
Outline individual agency protocols and provide an overview of the Department of Child and Family Services



1 THE ASQ-3 SCREENING TOOL 	2 THE ASQ-2 SE2 SCREENING TOOL 	3 BONDING & ATTACHMENT 	4 BRAIN & EARLY INFANT DEVELOPMENT 	5 CHILD ABUSE & MANDATORY REPORTING
6 CHILDHOOD MILESTONES & DEVELOPMENT 	7 COMPASSION FATIGUE 	8 CULTURAL COMPETENCY 	9 FAMILY PLANNING 	10 FAMILY VIOLENCE
11 FATHERHOOD ENGAGEMENT 	12 GRIEF & LOSS 	13 HEALTH COVERAGE 	14 HEALTHY HOMES 	15 HOME VISITOR SAFETY
16 LIFE SKILLS PROGRESSION 	17 MOTIVATING & SUPPORTING FAMILIES TO BREASTFEED/CHESTFEED 	18 MOTIVATIONAL INTERVIEWING 	19 ONGOING POSTPARTUM CARE 	20 PARENT-CHILD EMPATHETIC COMMUNICATION
21 PERINATAL DEPRESSION & PHQ-9 	22 PREVENTATIVE CARE 	23 REFLECTIVE PRACTICE 	<p>*Example curriculum for F5LA Funded Programs</p>	

Who is eligible for the services?

- Eligibility for each program varies based on program, home visiting model, income requirements, and geographical requirements
- Most models enroll prenatal with no minimum or maximum gestational age
- Postpartum enrollments vary (some models enroll up to 90 days, 18 months, or up until the child is 5 y/o)
- You can find out if a client is eligible by using our free eDirectory tool: <https://edirectory.homevisitingla.org/>

At a Glance: Home Visiting Programs in L.A. County's eDirectory

Use the eDirectory to screen for eligibility: edirectory.homevisitingla.org

	Early Start (Home-Start)	Early Start (School Success)	Healthy Families America	DFSU/Connecticut	Healthy Start	Home-Family Partnership	NCC/TCM
Prenatal enrollment	No min. or max. gestational age	No min. or max. gestational age	No min. or max. gestational age	No min. or max. gestational age	No min. or max. gestational age	No min. or max. gestational age	No min. or max. gestational age
Postpartum enrollment	Up until the child is 6 mos.	Up until the child is 6 yrs.	Up until 90 days postpartum	Up until 90 days postpartum	Up until 12 wks postpartum*	Up until 18 mos postpartum	Up until 18 mos postpartum
Income requirement	^1	X	X	X	^1	X	^1
Geographical requirement	^1	^1	^1	^1	^1	^1	^1
Service delivery	In-person visits	In-person visits	In-person and virtual options available	In-person and virtual options available	In-person and virtual options available	In-person and virtual options available	In-person and virtual options available
Frequency of visits	Weekly	2x/month	Weekly for first 6 months	Weekly for first 6 months	Bi-weekly with monthly check-ins until 18 months	Weekly, bi-weekly, then monthly (last 3 months)	Weekly, bi-weekly, then monthly (last 3 months)
Length of service	Until child is 3 yrs.	Until child is 5 yrs and starts kindergarten	3 years (but funds until 5 yrs)	Until child is 5 yrs	3 years (24 months)	Until child is 18 mos.	Until child is 2 yrs.
Additional requirements	X	X	Must be considered high-risk Per prenatal care report Not open to general at-risk population	X	X	X	X

^1 Income eligibility requirement may be waived for those who are homeless, involved in foster care, or receiving public assistance
*Home eligibility requirement may be waived for those with a high-risk pregnancy or with history of trauma or foster care
^2 Geographical requirement may be waived for those experiencing homelessness



Special CalWORKs home visiting program eligibility

- Child less than 24 months of age **OR**
- 19 or older and pregnant **AND**

One of the following:

- Member of the assistance unit
 - parent or caretaker relative of a child-only case
 - Apparently eligible for CalWORKs
 - part of an approved county special population
 - Can include non-custodial parent
-
- See Welf. & Inst. Code § 11330.6 (c) (2)

Although services differ across models, home visitors typically-

- Gather Family Information to Tailor Services
 - Screen caregivers for issues like postpartum depression, substance use, and domestic violence
 - Screen children for developmental delays
- Provide Direct Education and Support
 - Provide knowledge and training to make homes safer
 - Promote safe sleep practices
 - Offer information about child development
- Make Referrals and Coordinate Services
 - Help pregnant women access prenatal care
 - Check to make sure children attend well-child visits
 - Connect caregivers with job training and education programs
 - Refer caregivers as needed to mental health or domestic violence resources

CalWORKs Home Visiting is a voluntary service

- Home visiting is voluntary. Welf. & Inst. Code § 113307 (e)
- Home visitor cannot make random or unannounced visits. § 11330.7 (e)
- Home visitors must provide resources and referrals for domestic or sexual abuse, mental health, and substance abuse treatment. § 11330.7 (e)
- The family does not have to be eligible for or participate in Welfare-to-work. If they do participate in WTW, the hours count towards participation requirements. Welf. & Inst. Code § 11330.6(d)(3)
- Counties that choose to participate in the program should try to recruit staff that reflect the CalWORKs population demographics in the county. § 113306.
- CalWORKs Home Visiting participants can get up to \$1000 for material goods. Welf. & Inst. Code § 11330.7 (h)

How a home
visiting
program
helped a mom
get her kids
back



Joley and her kids with their Family Support Specialist Martha



Home visiting helped a family that was housing insecure or unhoused



Home visitors' respect families' privacy

- Families' information is requested in a culturally-sensitive and trauma-informed way.
- Programs do not track immigration status.
- Families can decline to share information they prefer not to and still enroll in services.
- Any information a family does share is used to tailor resources and support and track program outcomes at an aggregate level.
- All identifying information clients share with programs is confidential, regardless of funding, and protected by HIPAA and state privacy laws. It is stored in a secure and confidential database that even the funders do not have access to. The only way it can be accessed by government agencies is through a judicial subpoena.

*First 5 LA Funded WB, HFA, and PAT Programs

*DPH Funded Programs

Home Visiting Programs in L.A. County

Early Head Start

Early Steps to School Success

Healthy Families America

Healthy Start

Home Instruction for Parents of Preschool Youngsters

Nurse-Family Partnership

Parents as Teachers

Partnerships for Families

Raising Baby

Welcome Baby

Early Head Start (Home-Based)

- **Program Duration:** Prenatal enrollment through age 3
- **Dosage:** Weekly 90-minute visits + 2 monthly group sessions
- **Home Visitor Education:** Minimum CDA certificate; some programs use Master's-level interns
- **Intended Outcomes:**
 - Promote child development and school readiness
 - Support parents as primary caregivers
 - Strengthen community resource connections
 - Ensure high-quality service delivery

Healthy Families America (HFA)

- **Program Duration:** Up to age 3 or 5, depending on the agency
- **Dosage:** Weekly visits for first 6 months, then bi-weekly/monthly
- **Home Visitor Education:** Varies from high school diploma to Master's level
- **Intended Outcomes:**
 - Reduce child maltreatment and improve parenting
 - Enhance child health and school readiness
 - Increase access to healthcare and social services

Healthy Start

- **Program Duration:** Up to 24 months
- **Dosage:** Bi-monthly visits, may transition to quarterly
- **Home Visitor Education:** High school diploma with social service experience
- **Intended Outcomes:**
 - Reduce infant mortality and low birth weight
 - Address health disparities and risks

Nurse-Family Partnership (NFP)

- **Program Duration:** Pregnancy through age 2
- **Dosage:** Structured visit schedule from weekly to monthly
- **Home Visitor Education:** Public Health Nurses (PHNs)
- **Intended Outcomes:**
 - Improve maternal health and pregnancy outcomes
 - Enhance child development
 - Promote economic self-sufficiency

Parents as Teachers (PAT)

- **Program Duration:** Up to age 3 or 5, at least 2 years of service
- **Dosage:** Varies by risk level, typically 2 visits/month
- **Home Visitor Education:** Minimum high school diploma + 2 years of experience; most have a BA/BS or higher
- **Intended Outcomes:**
 - Improve parenting knowledge and child development
 - Detect developmental delays early
 - Enhance school readiness

Partnerships for Families (PFF)

- **Program Duration:** 6-12 months (can extend with DCFS approval)
- **Dosage:** At least 2 visits/month
- **Home Visitor Education:** Master's level clinician (exceptions apply)
- **Intended Outcomes:**
 - Strengthen protective factors in families
 - Prevent child abuse and neglect
 - Reduce parenting risk factors

Welcome Baby

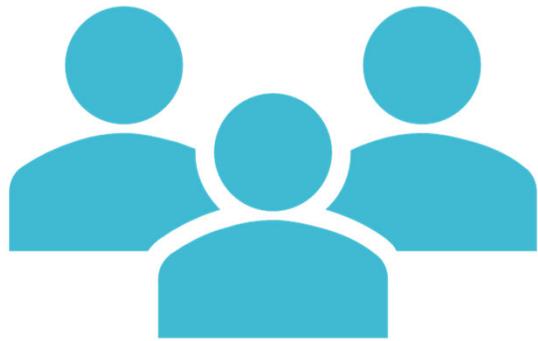
- **Program Duration:**
 - Best Start Neighborhoods: Prenatal to 9 months postpartum
 - LA County: Through 2 months postpartum
- **Dosage:** 9 engagement points (prenatal), 6 if enrolled at birth
- **Home Visitor Education:** BA preferred for home visitors; PHNs or RNs for nurse visits
- **Intended Outcomes:**
 - Promote maternal and child health
 - Increase breastfeeding and healthcare access
 - Support safe home environments

Raising Baby

- **Program Duration:** Third trimester to child's 3rd birthday
- **Dosage:** Bi-monthly visits + monthly group visits
- **Home Visitor Education:** Minimum BA, some experience in early childhood/home visiting
- **Intended Outcomes:**
 - Strengthen protective factors for families
 - Improve mental/emotional health and stress management
 - Enhance parental knowledge and skills

HIPPY (Home Instruction for Parents of Preschool Youngsters)

- **Program Duration:** Ages 2-5, must reside in Pasadena, Altadena, or Sierra Madre
- **Dosage:** Weekly home visits, monthly group meetings
- **Home Visitor Education:** LCSW for social workers; Parent Specialists
- **Intended Outcomes:**
 - Strengthen parents' ability to prepare children for school
 - Improve child health and social-emotional development
 - Enhance kindergarten readiness



Community Panel