

GREAT START GEORGIA AND MATERNAL, INFANT EARLY CHILDHOOD HOME VISITING (MIECHV)
TALKING POINTS AS OF JANUARY 13, 2015

Funding Agency/Organization: Health Resources and Services Administration (HRSA) in cooperation with the Administration for Children and Families.

Authority: Social Security Act, Title V, § 511(c) (42 U.S.C. § 711(c)), as added by § 2951 of the Patient Protection and Affordable Care Act (P.L. 111-148).

Purpose of Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Formula Grant: This program is designed: (1) to strengthen and improve the programs and activities carried out under Title V; (2) to improve coordination of services for at-risk communities; and (3) to identify and provide comprehensive evidence-based home visiting services to improve outcomes for families who reside in at-risk communities.

Georgia Lead Agency and Partners: The Department of Human Services, Division of Family and Children Services, Office of Prevention and Family Support is the designated lead agency for MIECHV. Other partners include: Department of Early Care and Learning; Department of Public Health, Maternal Child Health; Department of Education; Georgia Family Connection Partnership; Voices for Georgia's Children; Georgia Early Education Alliance for Ready Students; and local agencies.

Georgia's Formula Funding Allocation:

FFY10:	\$2,570,377
FFY11:	\$3,635,264
FFY12:	\$3,635,264
FFY13:	\$3,903,062
FFY14:	\$4,049,695
FFY15 Extension:	\$4,457,718 (application due 11/3/14)

Budget Requirements: There are no cost sharing/matching funds requirements for the MIECHV grant program. The project period for the FFY15 extension is March 1, 2015 – September 30, 2017.

Georgia's Plan for Formula Funding: Formula funding will be requested to support the continuation of the Great Start Georgia (GSG) framework in seven at-risk communities as determined by the 2010 needs assessment: **Clarke, Crisp, DeKalb, Glynn, Houston, Muscogee, and Whitfield counties.**

Between 10/1/13 and 9/30/14, **829** families received MIECHV-funded home visiting services.

One or more of the following evidence-based models are being implemented in the communities: Early Head Start-Home Based Option; Healthy Families America; Parents as Teachers; and Nurse Family Partnership.

Purpose of MIECHV Competitive Grant: This program provides funds to state lead agencies that continue to make significant progress under the MIECHV program towards implementing a high-quality home visiting program as part of a comprehensive early childhood system and are ready and able to expand the capacity to address additional unmet needs.

Georgia's Competitive Grant Application: Georgia's application proposes to: a) expand the evidence-based home visiting case load in five of seven currently funded at-risk counties; b) implement or expand an early childhood system with evidence based home visiting in five new counties; and c) support the supplemental infrastructure necessary for project management, central intake, technical assistance and training, evaluation, and data/information systems.

Expansion counties: Clarke, DeKalb, Glynn, Houston and Whitfield. (Crisp and Muscogee selected not to expand existing services.) **New counties:** Bartow, Chatham, Liberty, Richmond, and Rockdale. (Each identified as one of the top 25 counties in the statewide needs assessment conducted by Department of Public Health).

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Project Period: March 1, 2015 – September 30, 2017. Georgia’s application was submitted on October 17, 2014; HRSA will issue awards before the March 1, 2015 grant implementation date.

Estimated Award Amount: The ceiling amount is \$9.4m; Georgia applied for \$9.3m.

Georgia’s Early Learning Challenge Plan for Great Start Georgia: The Great Start Georgia Framework, including voluntary evidence-based home visiting for vulnerable families, will be implemented in the Early Education Empowerment Zones (E³Zs). In each of the four E³Zs, one or more early childhood education programs will be “hubs” to help link families to services.

- The Northwest Georgia E³Z includes: Catoosa, Gilmer, Gordon, Murray and Whitfield. Great Start Georgia will expand in **Gordon County**. *Whitfield* is currently MIECHV funded and serves some of *Murray County* as well as Whitfield. Catoosa and Gilmer are not among the 25 counties identified in the DPH needs assessment.
- The Northeast Georgia E³Z is one county: *Clarke County*. Clarke is currently MIECHV funded and the MIECHV expansion grant application proposes to add additional services. An early childhood education program will serve as a hub for the expansion.
- The Central Georgia E³Z is one county: *Bibb County*. Great Start Georgia will expand in **Bibb County**.
- The South Georgia E³Z includes: Brooks, Colquitt, Cook, Echols, and Lowndes counties. Great Start Georgia will expand in **Lowndes County**. Brooks, Cook and Echols are not among the 25 counties identified in the DPH needs assessment. Colquitt, like Lowndes, is among the 25 identified counties; however, the county does not currently have capacity in its early childhood education programs to serve as a hub.

General Background Information

Georgia’s use of MIECHV: MIECHV provides Georgia with an unprecedented opportunity to strengthen Georgia’s capacity for addressing the health, safety and well-being of families and children at risk through the implementation of a community-based maternal and early childhood systems framework called Great Start Georgia. The goal is to improve child and family outcomes by: (1) improving coordination of services for children and families at the state and local levels; and (2) providing comprehensive services to improve outcomes for children and families who reside in at-risk communities.

The Great Start Georgia framework provides a population-based approach to identifying expectant parents, children birth to age five, and their families to furnish information, support, and links to community services, including voluntary evidence-based home visiting programs for vulnerable families.

The Great Start Georgia training and technical assistance team at the University of Georgia- Center for Family Research works closely with local and state partners to plan and coordinate services within the GSG framework. This includes all required state partners, other appropriate private entities, and local agencies that provide the constellation of services represented in the framework for expectant parents and families of young children.

Benchmarks: The Georgia MIECHV program is participating in the MIHOPE National Level Evaluation as well as the required state benchmark tracking to ensure each community meets the legislatively-mandated benchmarks.

Benchmarks include: Improved Maternal and Newborn Health; Reduced Child Injuries, Child Abuse, Neglect, or Maltreatment; Reduction of Emergency Department Visits; Improved School Readiness and Achievement; Decreased Domestic Violence; Improved Family Economic Self-Sufficiency, and Improved Coordination and Referrals for Other Community Resources and Supports.

Some of the areas where Georgia has shown improvements for participating families include, but are not limited to, the following:

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(1) Completion of prenatal visits; (2) Parental smoking; (3) Post-partum check-up completion; (4) Referrals for maternal depression; (5) Child visits to emergency departments; (6) Dissemination of safety information; (7) Level of support for child's learning and development; (8) Knowledge of child's development and progress; (9) Level of emotional well-being; (10) Referrals for child's communication, language and emergent literacy delays; (11) Referrals for child's general cognitive delays; (12) Referrals for child's social-emotional delays; (13) Referrals for child's physical development delays; (14) Domestic violence screening; (15) Monthly household income and benefits; and (16) Mother's expansion of education.

Supports Needed: Great Start Georgia provides information on parenting, child development, early learning, and community resources. It links families with more intensive services when needed and allows families to choose the services and programs that they want. However, additional state funding is needed to identify expectant parents and families with children birth to five years to offer them the support and link them to existing community resources that they need to improve child outcomes.

- Using MIECHV formula and previous expansion grant funding, Georgia has developed a comprehensive, community-based maternal and early childhood system, Great Start Georgia, and the infrastructure necessary to operate effectively in challenged community contexts.
- Great Start Georgia has been implemented in fewer than 25 of Georgia's 159 counties. (Bartow, Bulloch, Chatham, Clarke, Crisp, DeKalb, Floyd, Glynn, Gordon, Habersham, Henry, Houston, McDuffie, Morgan, Muscogee, Newton, Pickens, Rockdale, Spalding, Troup, and Whitfield.)
- State appropriations for First Steps Georgia, which awards mini-grants of \$6,000 or \$12,000 to communities, helps counties to implement the framework.

Partners, such as the Georgia Department of Public Health, help identify and refer expectant parents (WIC clinics, pregnancy testing clinics, prenatal visits, RSM applications), families with newborns (screening electronic birth certificates) and families with young children (immunization clinics, well-baby check-ups, Children 1st, Babies Can't Wait). Funding to implement the Great Start Georgia framework statewide (additional mini-grant funding for communities) and for partner agencies, specifically the Georgia Department of Public Health and DHR's Office of Prevention and Family Support, is needed to ensure all of Georgia's families have access to services in their communities.