

# WHAT IS MIECHV? THE IMPACT OF NEW FEDERAL FUNDING IN VIRGINIA

Authorized by the Affordable Care Act, the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program was established through a federal grant process issued jointly by Health Resources and Services Administration, and the Administration for Children and Families. The MIECHV program brings the first federal funding for home visiting to Virginia and is administered by the Virginia Department of Health. The grant awards Virginia an additional \$9 million (\$7 million for services, \$2 for infrastructure and research) to expand home visiting services and improve our network of home visiting programs. The grant is currently authorized through 2015 and will need to be reauthorized by Congress to become a permanent source for Virginia. The president's budget includes a proposal to make this funding permanent but the current Congressional gridlock makes its future uncertain.

As with most funding opportunities these federal funds come with a few strings attached- MIECHV funded projects must serve at-risk communities and programs must adhere to one of 13 evidence-based home visiting models. To meet these requirements, Virginia had to designate certain localities as at-risk through a needs assessment process identifying localities with the poorest birth outcomes for pregnant women and infants. Forty-two localities were identified as at-risk and able to apply to receive expansion funds. With additional federal funding, VDH was able to identify 17 community-based grantees to expand services in 25 localities.

The expansion of services also brought additional evidence-based home visiting models to Virginia. Both the CHIP and Healthy Families Virginia programs were using the Parents as Teachers (PAT) evidence-based curriculum with families on home visits but now some local programs are also using the PAT model (prescribing a certain number of visits per month and relevant goals) in addition to the curriculum. We also now have five localities implementing the Nurse-Family Partnership model, one of the oldest and most rigorous evidence-based models for home visiting that partners nurses with first time pregnant women. These programs enhance the home visiting service offerings for families in Virginia and bring additional technical expertise to the Home Visiting Consortium.

## THE MIECHV GRANT PROVIDES RESOURCES FOR VIRGINIA TO EXPLORE INNOVATIONS TO OUR HOME VISITING SYSTEM. THE FUNDS HAVE PROVIDED:



A core training curriculum provided at no-cost to all home visiting programs. Core training covers the essential skills in relationship building and motivational interviewing for home visitors.



Promising practices research to determine if the Virginia-grown Resource Mothers model can qualify as an evidence-based program.



Pilot projects to create a single point of entry and referral in four communities. To maximize resources and identify families in need, four communities are piloting efforts to screen and enroll families through a central intake point rather than multiple agencies.



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