



South Carolina: Maternal, Infant, and Early Childhood Home Visiting Program

By the Center for Law and Social Policy February 9, 2015 and the Center for American Progress

The Maternal, Infant, and Early Childhood Home Visiting, or MIECHV, program provides South Carolina with the opportunity to expand its capacity for home visiting and a nonprofit that serves as the implementation organization for the grant—administers MIECHV. The majority of the MIECHV grant provides funding to programs throughout South Carolina, offering a variety of home visiting models that provide targeted services. Additionally, MIECHV funds support ongoing evaluations of the home visiting system, the formation of home visiting infrastructure, and the expansion of professional development opportunities for the home visiting community.

Success and innovation

Home visiting summit

South Carolina administrators organized annual home visiting summits, which brought together home visiting and other early childhood professionals to share best practices and collaborate on improving the state home visiting system. The summits helped to break down barriers and silos within the home visiting communities, as well as foster connections to encourage ongoing relationship development. The most recent summit held in September 2014 attracted over 300 people who embraced the opportunity to work more closely as a community of home visiting professionals and to build the early childhood system.



South Carolina MIECHV at a glance

Total federal MIECHV funding:

\$6.7 million in competitive grant funds and \$1.8 million in formula grant funds for fiscal year 2013-2014

Lead agency:

Children's Trust of South Carolina

Number of communities served:

37 counties

MIECHV-funded home visiting models:

Family Check-Up; Healthy Family America, or HFA; Healthy Steps; Nurse Family Partnership, or NFP; and Parents as Teachers, or PAT

Families served:

Currently 1,126 families enrolled; total service capacity is 2,450 families

Identified catchment areas to support local communities

State administrators identified 7 catchment areas, which are areas from which a program's potential families are drawn, that provide evidence-based home visiting services to 37 of 46 counties in South Carolina. Catchment areas allowed the Children's Trust to create partnerships among local family support service providers. These partnerships have facilitated a hub and spoke approach that connects families with the best resources to meet their needs while creating effective local referral and communication networks. This approach has also opened up home visiting services to families in high-risk rural communities that were previously isolated from this type of intensive service.

Providing home visiting through medical homes

South Carolina expanded home visiting services through pediatric medical homes. This model for providing comprehensive and coordinated medical care to infants, children, adolescents, and young adults is accessible, continuous, family-centered, compassionate, and culturally effective. Competitive grant funding allowed the state to extend evidencebased home visiting services to nine new sites, including seven pediatric medical homes through the Healthy Steps program. The medical home strategy allowed the state to apply a family-centered approach to home visiting and integrate home visiting into the child health care system.

Challenges

Administrators cited South Carolina's lack of a central intake system as a significant challenge. Since the state lacks a coordinated system to refer families to the various home visiting models, some families must wait for services from one model, unaware that slots are available in another.

Looking ahead

Evaluate and expand systems

Moving forward, South Carolina plans to continue to evaluate its implementation and expansion of evidence-based home visiting services.

Identify additional funding sources

South Carolina administrators are actively exploring alternative funding sources to ensure the ongoing success of home visiting in the state and to expand services beyond the capacity achieved through MIECHV funds.

South Carolina MIECHV at a glance

Additional funding for home visiting:

state general funds, The Duke Endowment, Blue Cross Blue Shield South Carolina Foundation, and pending funds from Pay for Success in partnership with The **Rockefeller Foundation**

Identified risks targeted by MIECHV:

child abuse and neglect; maternal and infant health care; school readiness; domestic violence; child maltreatment; service gaps for first-time and repeat pregnancy mothers and families

Additional information

South Carolina's MIECHV program: http://www.scchildren.org/about_us/programs/ home_visiting/

South Carolina's MIECVH Needs Assessment: http://www.scchildren.org/public/ files/docs/MIEC/9.20.10NeedsAssessment.pdf

Source: Interview with Sue Williams, chief executive officer, Children's Trust of South Carolina, October 2014; Eric Bellamy, maternal, infant and early childhood home visiting manager, Children's Trust of South Carolina; and Lee Porter, chief program officer, Children's Trust of South Carolina, October 2014.

"MIECHV has shown that many different models can work together to best meet the needs of families." - South Carolina state administrator

This profile was written as part of a larger study to identify how states are using Maternal, Infant, and Early Childhood Home Visiting, or MIECHV, funds to advance state home visiting systems. For a summary report and additional profiles about home visiting, visit clasp.org or american progress.org.