

## State Home Visiting Vision and Priorities – 2019

### VISION

*Robust home visiting services, intentionally embedded within a broader system of prevention, support families expecting and caring for young children to establish healthy foundations, leverage opportunities for children’s developmental and future successes, and achieve their full potential.*

With an awareness of disparities in child and parent well-being across race and ethnicity, the home visiting system in Illinois is committed to approaching service delivery and systems design through a strengths-based racial equity lens. Recognizing that learning begins at birth, and relational health and care begins before birth, home visiting in Illinois fosters seamless, uninterrupted, and equitable access to high quality early childhood experience and services from the prenatal through early childhood periods. The statewide home visiting system further encourages multi-disciplinary collaboration across state and local providers serving families and young children, including health, mental health, Early Intervention, child welfare, economic security, and human services systems. The balance between targeted, needs-based services and the universal vision that all new parents and families can benefit from additional supports and resources, provides a conduit for home visiting in Illinois to reach more young children with services that are responsive to family needs, circumstances and preferences. Finally, amidst renewed energy and investment in the birth to five space, Illinois actively pursues innovative strategies for home visiting service delivery while advancing equity-driven, structural changes to the systems that serve families and young children. The Illinois home visiting system encompasses a coordinated continuum of high-quality services that are accessible to all who can benefit from them, and aims to:

- Promote positive attachment and social-emotional development to strengthen parent-child relationships;
- Promote maternal, infant, and early childhood health, mental health, and safety, with an eye toward documented disparities in health outcomes;
- Provide developmental screening, monitoring, and referrals to bolster school-readiness;
- Link families to community resources and services and promote cross-system collaboration; and
- Embrace Infant Mental Health Consultants and doulas as an integral component of prenatal to early childhood service delivery models.

### PRIORITIES

To further this vision, the Illinois home visiting system is committing to initiating, adapting, and evaluating innovative practices, promoting collaboration across funding streams, programs, and geography, and ensuring equity in how families access and receive services.

- Increase private and public investment to expand access to home visiting for all eligible families to achieve desired saturation and take innovative models to scale.
- Expand universal touch for all new births to connect families with local community services and resources based on individual needs and family wishes.
- Secure sustainability through diversification of funding, including:
  - Establishing Medicaid financing for home visitors and doulas.
  - Exploring additional alternate federal funding streams (e.g Families First Preservation Act through the Illinois Department of Family and Child Services).
  - Strategizing around greater investment from the Illinois Department of Human Services.

- Increase alignment across home visiting funding streams and systems, including:
  - Improving cross-system data collection and dissemination, including shared outcome metrics, to inform resource allocation.
  - Establishing statewide system points of entry for home visiting and coordinated enrollment across funders at the community level.
- Increase investments to develop and maintain a stable, well-trained workforce:
  - Strengthening workforce compensation, preparation, and ongoing professional support.
  - Bolstering the professionalization of the field, including developing career pipelines.
- Support in systems-building and improve connections to and shared practices with other needed services, including:
  - Establishing regional cross-system referral pathways to home visiting.
  - Improving connections across systems like Early Intervention and Child Welfare.

## PRINCIPLES

Across these priorities, and agnostic of approaches and funding streams, the Illinois home visiting system strives to operate and grow within a set of core principles:

- Continuum of Services – Home visiting is an integral part of a well-coordinated continuum of services for families, beginning prenatally and continuing through early childhood.
- Evidence-based – Home visiting programs use models and curricula whose effectiveness is supported by research.
- Entrepreneurial and participant-informed – The home visiting system recognizes the value of family experience and voice and strives to grow promising practices and innovations emerging from community and participant input.
- Culturally and linguistically responsive – Home visiting actively honors parent and community perspectives and ensures that services are culturally and linguistically responsive.
- Voluntary and accessible – Families are free to choose whether or not to participate, and statewide, those who want to can access services in their community.
- Outcome driven – The State is able to demonstrate outcomes related to maternal and child health, school readiness, and reduction of child abuse and neglect.
- Skilled Workforce – Home visiting services are delivered by early childhood professionals, who must receive appropriate professional development and compensation.
- Aligned – Home visiting services are aligned with the Illinois Early Learning Guidelines ([IELGs](#)) and Illinois Early Learning and Development Standards ([IELDS](#)).

