

211.689 Agencies receiving state funds for home visitation services.

(1) As used in this section and KRS 211.690:

- (a) "Home visitation" means a service delivery strategy with voluntary participation by eligible families that is carried out in the homes of at-risk parents during the prenatal period and until the child's third birthday that provides face-to-face visits by nurses, social workers, and other early childhood professionals or trained and supervised paraprofessionals to improve maternal, infant, and child health and well-being, including:
 - 1. Reducing preterm births;
 - 2. Promoting positive parenting practices;
 - 3. Improving school readiness;
 - 4. Enhancing the social, emotional, and cognitive development of children;
 - 5. Reducing child abuse and neglect;
 - 6. Improving the health of the family; and
 - 7. Empowering families to be self-sufficient;
- (b) "Home visitation program" means the voluntary statewide home visiting program established by KRS 211.690 or a program implementing a research-based model or a promising model that includes voluntary home visitation as a primary service delivery strategy that may supplement but shall not duplicate any existing program that provides assistance to parents of young children and that does not include:
 - 1. Programs with few or infrequent home visits;
 - 2. Home visits based on professional judgment or medical referrals that are infrequent and supplemental to a treatment plan;
 - 3. Programs in which home visiting is supplemental to other services, such as child protective services;
 - 4. In-home services delivered through provisions of an individualized family service plan or individualized education program under the federal Individuals with Disabilities Education Act, Part B or C; or
 - 5. Programs with goals related to direct intervention of domestic violence or substance abuse;
- (c) "Research-based model" means a home visitation model based on a clear, consistent program model that:
 - 1. Is research-based, grounded in relevant empirically based knowledge, linked to program determined outcomes, has comprehensive home visitation standards that ensure high-quality service delivery and continuous quality improvement, and has demonstrated significant, sustained positive outcomes;
 - 2. Employs highly trained and competent professionals or paraprofessionals who are provided close supervision and continual professional development and training relevant to the specific model

- being delivered;
 - 3. Demonstrates strong linkages to other community-based services; and
 - 4. Is operated within an organization to ensure program fidelity and meets the outlined objectives and criteria for the model design; and
- (d) "Promising model" means a home visitation model that has ongoing research, is modeled after programs with proven standards and outcomes, and has demonstrated its effectiveness or is actively incorporating model evaluation protocols designed to measure its efficacy.
- (2) Beginning fiscal year 2014, an agency receiving state funds for the purpose of the delivery of home visitation services shall:
- (a) Meet the definition of home visitation program in this section;
 - (b) Demonstrate to the Department for Public Health that it is part of a coordinated system of care for promoting health and well-being for at-risk parents during the prenatal period and until the child's third birthday; and
 - (c) Report data to the statewide home visiting data system managed by the Department for Public Health in a uniform format prescribed by the department assuring common data elements, relevant home visiting data, and information to monitor program effectiveness, including program outcomes, numbers of families served, and other relevant data as determined by the department.

Effective: June 25, 2013

History: Created 2013 Ky. Acts ch. 118, sec. 16, effective June 25, 2013.