



Ohio's Help Me Grow Program: Serving Ohio's Vulnerable Infants and Toddlers

Overview

Help Me Grow is Ohio's birth to three program that provides state and federal funds¹ to county Family and Children First Councils to provide home visitation services for expectant parents, newborns, infants and toddlers up to age three. Help Me Grow serves two populations- families with infants and toddlers with or at-risk for developmental delays or disabilities and families who are at-risk due to certain criteria, including teen pregnancy, a history of abuse and neglect, and other factors. Help Me Grow is a voluntary program and is designed to support the child and the child's family with the goal of enhancing the child's development.

The Ohio Department of Health, Bureau of Early Intervention Services is the lead agency administering Help Me Grow in Ohio and at the local level Help Me Grow is administered through 88 county offices.

Population Served and Services Provided

In SFY 2008, Help Me Grow served 93,207 children and families through new referrals and ongoing services.² Services include prenatal home visits, newborn home visits, ongoing home visits for at-risk children, developmental screenings and evaluations, service coordination, linkages to special needs services, and family support. Under current program guidelines, each county determines eligibility for their population but these services may be offered to any parent in the state with nearly half (49.7 percent) of new referrals in SFY 2008 coming from hospitals. Help Me Grow provides the following services:

Newborn and Prenatal Home Visits

Newborn and Prenatal home visits are offered to parents to identify strengths and potential challenges for the child and family. In SFY 2008, the average age of a child at the initial home visit was 13 days. Among the top five topics covered at the home visit are infant feeding, newborn care and immunizations.³ The mother and child also receive a physical assessment. At this visit, should certain criteria be met, the family will be linked to additional services under the at-risk or Part C portion of the program. In SFY 2008, 34,597 Help Me Grow newborn home visits and 620 Help Me Grow prenatal visits were conducted.⁴

On-going Visits for At-risk Families

Ongoing home visits are provided to children and families that have been identified as meeting at least four criteria that indicate a child may be at-risk for developmental delay. The five most common risk factors seen in Ohio include family income, physical or social isolation, adolescent mother, inadequate health care and lack of a stable residence.⁵

Research indicates that early interventions are the best chance at mitigating the effects of these risk factors, improving outcomes for children and their families, and reducing public expenditures in the future.⁶ At-risk services are also considered effective in preventing child abuse as "child abuse prevention and intervention activities must address the risk factors for maltreatment, and strengthen families and communities to create healthier environments for raising children."^{7, 8} In SFY 2008, 35,787 children were served in this category.⁹

Part C Services

Part C services are federally-funded home visits available to children who have been identified as having a medically diagnosed disability or developmental delay. In SFY 2008, 25,203 children with developmental delay or medical diagnosis were served by Help Me Grow. Of those, 54.8 percent had a developmental delay only, 39.4 percent had a medical diagnosis only and 5.2 percent had both a developmental delay and a medical diagnosis.¹⁰

A State Interagency Coordinating Council, The Ohio Help Me Grow Advisory Council, provides assistance, advice and makes informed and supportive recommendations to the lead agency for Part C in Ohio, the Ohio Department of Health (ODH). As required by federal law and regulations, the council is composed of representatives of a broad cross-section of stakeholders and service providers, including parents, state and local agencies, and medical professionals.

Funding History and Proposal in the SFY 2010-2011 Executive Budget

In the SFY 2008-2009 budget, Help Me Grow received an increase of \$21 million over the biennium. Funding increases helped to increase the funding for services to children, reimbursement to providers and overall program quality.

In previous budget, Help Me Grow was primarily funded through TANF funding. In the proposed SFY 2010-2011 Executive Budget, Help Me Grow has been moved out of the TANF budget and funded through GRF funding and received an overall funding cut of forty percent. To manage caseloads with the reduced funding, the Executive Budget proposes eliminating one-time newborn and prenatal home visits and targeting services to families with characteristics that research indicates are the most at-risk of developmental delay and the most likely to benefit from the services.

Changes in Help Me Grow eligibility include limiting access to first-time parents with incomes below 200 percent of the federal poverty level. Families meeting these criteria will be able to enroll starting in the second trimester of the pregnancy until the child is six months old; under current guidelines a child may be enrolled any time before their third birthday, when they age out of the program. The Part C portion of the program will not be limited by these criteria as it serves a different population.

Additionally, the Executive Budget proposes standardizing Help Me Grow services across the state, with the goal of Help Me Grow becoming eligible to draw down Medicaid funds for the at-risk home visitation through the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program within Medicaid. While, in the long run, this will increase the federal share of the cost of the program, the complex issues of program standardization, Medicaid eligibility and the mechanics of Medicaid billing at the local level will not be resolved before the start of the biennium.

¹ Federal funds are provided under the Individuals with Disabilities Education Act (IDEA), Part C – Early Intervention for Infants and Toddlers.

² Ohio Department of Health

³ Ohio Help Me Grow Statewide Profile Report for SFY08

⁴ Ibid.

⁵ Ibid.

⁶ groundWork. *Early Care and Education: Forty Years of Research*. 2008

⁷ Daro, Deborah. *Home Visitation: Assessing Progress, Managing Expectations*. Chapin Hall Center for Children at The University of Chicago and Ounce of Prevention Fund. 2006.

⁸ Peddle, Nancy, Wang, Chung-Tung, Diaz, Javier and Reid, Robert. *Current Trends in Child Abuse Prevention and Fatalities: The 2000 Fifty State Survey*. National Center on Child Abuse Prevention Research, a program of Prevent Child Abuse America. September, 2002.

⁹ Ohio Help Me Grow Statewide Profile Report for SFY08

¹⁰ Ibid.