

Kentucky MIECHV Program FY 2022

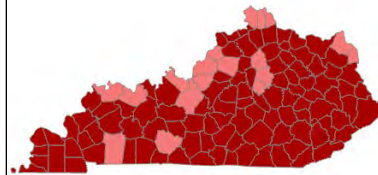
HRSA's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

supports the [Kentucky Home Visiting Program](#) and provides voluntary, evidence-based home visiting programs for expectant and new parents with children through kindergarten entry age living in communities that are at-risk for poor maternal and child health outcomes¹.

Kentucky MIECHV Program At-a-Glance

Rural counties by Funding Source:

■ MIECHV: Adair, Allen, Anderson, Ballard, Barren, Bath, Bell, Bourbon, Boyle, Bracken, Breathitt, Breckenridge, Butler, Caldwell, Calloway, Carlisle, Carroll, Carter, Casey, Clark, Clay, Clinton, Crittenden, Cumberland, Edmonson, Elliott, Estill, Fleming, Floyd, Franklin, Fulton, Gallatin, Garrard, Grant, Graves, Grayson, Green, Hancock, Harlan, Harrison, Hart, Henry, Hickman, Hopkins, Jackson, Johnson, Knott, Knox, Larue, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, Livingston, Logan, Lyon, Madison, Magoffin, Marion, Marshall, Martin, Mason, McCracken, McCreary, McLean, Menifee, Mercer, Metcalfe, Monroe, Montgomery, Morgan, Muhlenberg, Nelson, Nicholas, Ohio, Owen, Owsley, Pendleton, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Simpson, Spencer, Taylor, Todd, Trigg, Trimble, Union, Washington, Wayne, Webster, Whitley, Wolfe, Woodford



Participants

1,950

Households

1,043

Home Visits

24,423

Non-rural counties by Funding Source:

■ MIECHV: Boone, Boyd, Bullitt, Campbell, Christian, Daviess, Fayette, Greenup, Hardin, Henderson, Jefferson, Jessamine, Kenton, Meade, Oldham, Scott, Shelby, Warren

Kentucky Prioritizes Community Needs

MIECHV Program awardees tailor their programs to serve populations of need within their state. In Kentucky:

- **54.6%** of households were at or below 100% of the Federal Poverty Guidelines
- **5.8%** of households included a pregnant enrollee under age 21

Kentucky Performance Highlights

MIECHV Program awardees track and report improvements in MIECHV benchmark areas every year. Awardees are required by authorizing statute to demonstrate improvement in benchmark areas every three years. In the most recent assessment following FY 2020, the Kentucky MIECHV program successfully met the requirements for demonstration of improvement by improving in all 6 MIECHV [benchmark areas](#).

Evidence-Based Home Visiting Models in Kentucky

[Health Access](#)
[Nurturing](#)
[Development](#)
[Services \(HANDS\)](#)

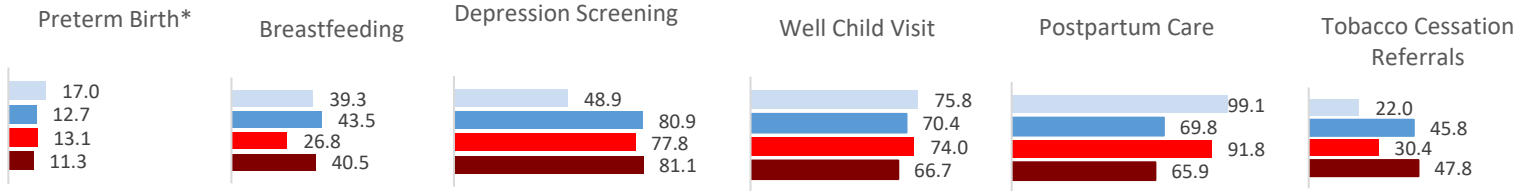
FY 2022 Performance Highlights Include:

- **Postpartum Care: 99.1%** of mothers enrolled in home visiting received a postpartum visit with a healthcare provider within 8 weeks of delivery. Many maternal deaths occur in the postpartum period and are considered preventable with appropriate follow-up care – the CDC has found that 66 percent of postpartum deaths are preventable.
- **Early Language and Literacy Activities: 93.9%** of children enrolled in home visiting had a family member who read, told stories, and/or sang with them on a daily basis. Children who are spoken to frequently by their caregivers have larger vocabularies and literacy skills, which are linked to later academic, social, and cognitive functioning.

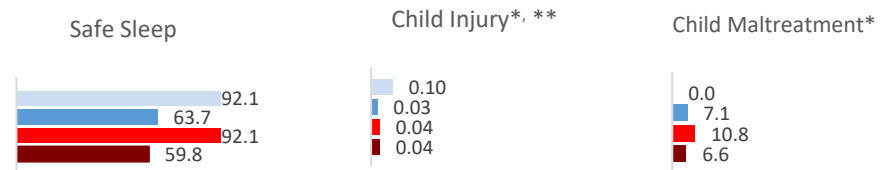
¹ HRSA awarded ARP [American Rescue Plan Act](#) funds to current MIECHV awardees to address the needs of families in response to the COVID-19 pandemic.

Kentucky MIECHV Performance Measurement Data Compared to MIECHV Averages²

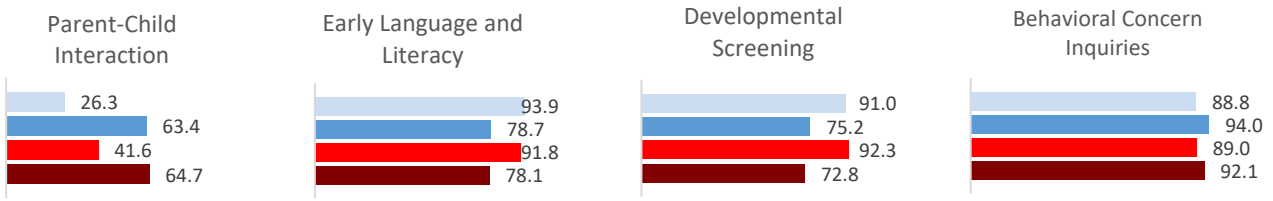
Benchmark Area 1 – Maternal and Newborn Health Outcomes



Benchmark Area 2 – Child Injuries, Abuse, Neglect, and Maltreatment and Emergency Department Visits

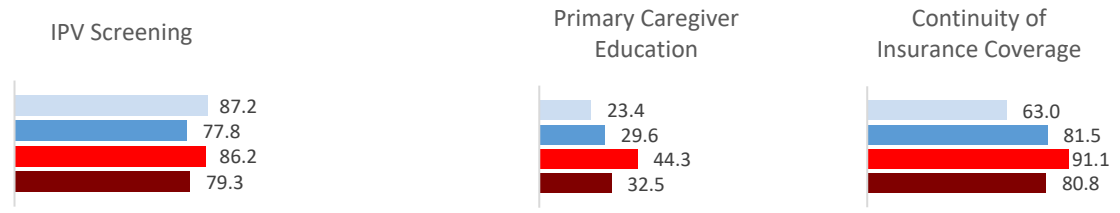


Benchmark Area 3 – School Readiness and Achievement

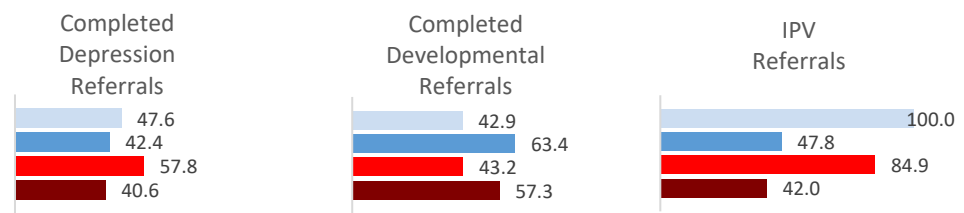


Benchmark Area 4 – Crime or Domestic Violence

Benchmark Area 5 – Family Economic Self-Sufficiency



Benchmark Area 6 – Coordination and Referrals for Other Community Resources and Supports



Kentucky MIECHV (FY 2022)
 MIECHV National Average (FY 2022)
 Kentucky MIECHV Rolling Average (FY 2019- FY 2021)
 MIECHV National Rolling Average (FY 2019- FY 2021)

² Comparison to a three-year average minimizes the effects of outliers or potential data reporting issues specific to one year.
 * Direction for improvement in performance is downwards. **Child Injury reported as a rate