

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

supports the [Ohio 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.

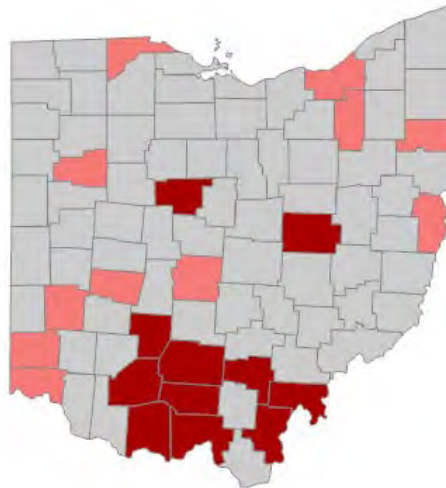
Ohio MIECHV Program At-a-Glance

Rural counties by Funding Source:

■ MIECHV: Adams, Coshocton, Fayette, Gallia, Highland, Marion, Meigs, Pike, Ross, Scioto, Vinton

Non-rural counties by Funding Source:

■ MIECHV: Allen, Butler, Clark, Cuyahoga, Franklin, Hamilton, Jefferson, Lucas, Mahoning, Montgomery, Summit



Participants
3,599

Households
1,904

Home Visits
18,327

Ohio Prioritizes Community Needs

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

- **87.2%** of households were at or below 100% of the Federal Poverty Guidelines
- **8.7%** of households included a pregnant enrollee under age 21

Ohio 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 Ohio MIECHV program successfully met the requirements for demonstration of improvement by improving in all 6 MIECHV [benchmark areas](#).

FY 2022 Performance Highlights Include:

- **Well Child Visits:** 95.6% of children enrolled in home visiting received their last recommended well child visit based on the American Academy of Pediatrics schedule. Routine well-child check-ups prevent illness (through timely vaccinations), promote early identification of concerns, and ensure that children remain healthy.
- **Quality Assurance:** Ohio re-designed their Quality Assurance process for local implementing agencies (LIAs) in order to maximize existing data and data reports and to clarify expectations for all funding providers, inclusive of all home visiting models. This included developing new quarterly data reports for LIAs.

Evidence-Based Home Visiting Models in Ohio

[Healthy Families America \(HFA\)](#)

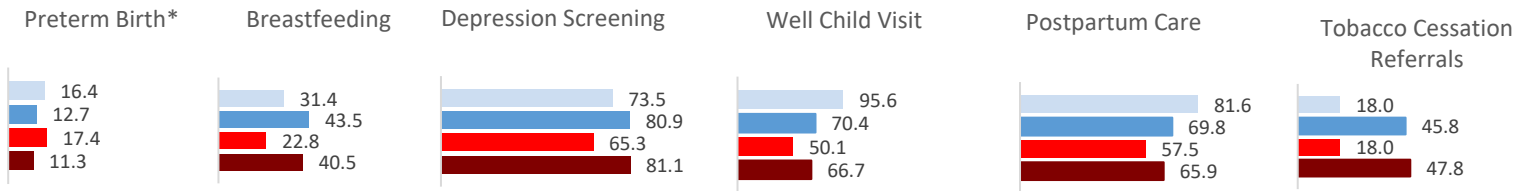
[Nurse-Family Partnership \(NFP\)](#)

[Parents as Teachers \(PAT\)](#)

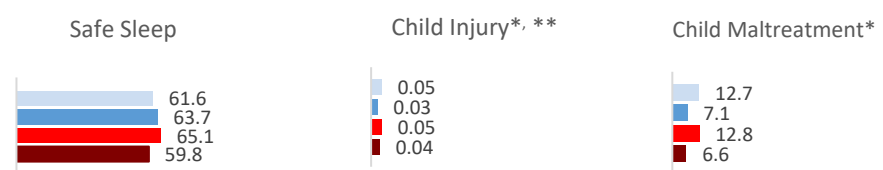
¹ HRSA awarded ARP [American Rescue Plan Act](#) funds to current MIECHV awardees to address the needs of families in response to the COVID-19 pandemic.

Ohio MIECHV Performance Measurement Data Compared to MIECHV Averages²

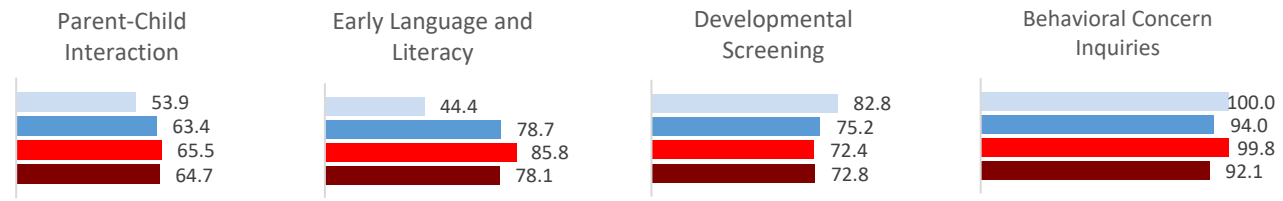
Benchmark Area 1 – Maternal and Newborn Health Outcomes



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

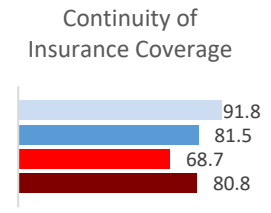
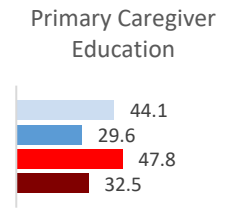
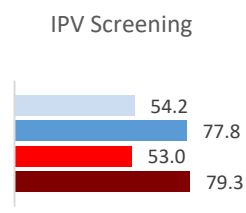


Benchmark Area 3 – School Readiness and Achievement

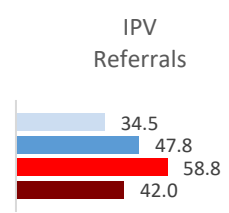
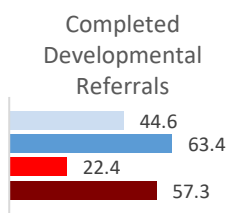
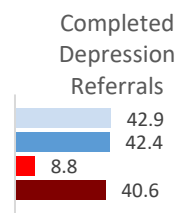


Benchmark Area 4 – Crime or Domestic Violence

Benchmark Area 5 – Family Economic Self-Sufficiency



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



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