

## Background

In Kansas (KS), the referral and engagement process for families varies widely, and there are few established protocols or practices across home visitors or models to guide families to other services. This results in little consistency in how referrals are made, to whom, and when. Partners are often unable to reliably track whether a family is engaged in other services in a community or coordinate those communications effectively among partners. Utilizing a web-based communication tool, Integrated Referral and Intake System (IRIS), the approach to address these issues built upon the foundation of formal and informal networks within communities. By engaging multi-sector partners in the process of closing the communication loop between identifying a need, creating a referral, and ensuring there is a complete, warm handoff, families can experience the referral program with accessible pathways to the supports they need.

This project aimed to demonstrate improvement in the following priority area(s):

- Priority #3: Coordination of MIECHV-funded home visiting programs with community resources and supports.

### Resources

[KS MIECHV Program](#)

[IRIS](#)

[MIECHV Innovation Awards](#)

## Project Activities and Highlights

The KS MIECHV IRIS project developed the Connected Community/Connected Family model, an approach focused on how MIECHV communities collaborate around referral and service engagements for and with at-risk families in home visiting services and other early childhood/health systems. The Connected Community model braided adaptive solutions with technology through IRIS to support interagency communication, foster shared accountability for referral follow up, and promote a client-centered strategy for involving and engaging families in the service coordination process.

### *Project Activities*

- Gained commitments from 95 partner organizations across the state from early childhood, maternal and child health, and multi-sector ancillary service fields.
- Conducted five focus groups with 81 participants to gather families' stories about accessing resources and to identify approaches to improve families' experiences navigating referrals.

### *Lessons Learned*

- Develop standardized referral protocols for coordinated intake to establish and strengthen partnerships.
- Community-driven outreach builds engagement with multi-sector organizations and providers.

## Evaluation Summary

### *Evaluation Findings*

- Across three timepoints, the number of actual connections made for Southeast KS and Wyandotte County increased from 44 to 936 and 41 to 115, respectively.
- One year after roll-out of the pilot, Southeast KS and Wyandotte County reported 97.6% and 94.6% of total referrals completed, respectively.

### *Sustainability*

- As of 2019, the referral network infrastructure is secure and new partners continue to be engaged.

### *Recommendations for the Home Visiting Field*

- Connected Communities need to be cross-sector, collaborative, and communicate effectively in order to meet family needs.
- Warm handoffs facilitated through IRIS contribute to meaningful conversations and decisions about referrals.

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