Strengthening Home Visiting in Los Angeles County

Overview: Using a collaborative approach, the Department of Public Health leveraged resources to expand and coordinate a home visiting system for pregnant/parenting women and families.

Challenge: Culturally responsive, high-quality home visiting improves maternal, infant and child health by offering pregnant and parenting women social support, health education and linkage to needed services. By 2017, LA County Departments of Health Services, Mental Health, and Public and Social Services, and First 5 LA were adding a county investment of almost $60 million to a $31 million federal investment in home visiting, jointly supporting an array of programs designed to serve families at varying degrees of risk. Despite strong commitment, however, Los Angeles County lacked the coordination needed to ensure that resources were allocated equitably across populations and throughout the region. Furthermore, the difficulty of navigating multiple home visiting programs with varied eligibility criteria, catchment areas, and service models made it challenging for parents and providers to link families to the programs that best met their needs.

Solution: Los Angeles County Department of Public Health (DPH) partnered with sister departments, First 5 LA and other stakeholders to develop a home visiting system that is: responsive to community needs, easy to access and navigate, anchored in community-level partnerships, and sustainable. This comprehensive system strategically layers an array of effective evidence-based, innovative, and community-responsive home visiting services to assist families in achieving strong health, social, and behavioral outcomes, especially those in the areas within Los Angeles County with the highest levels of adverse maternal, infant and child health outcomes. The system is also designed to link home visiting with maternity, infant and pediatric health care, early education and care, and other programs targeting young families.

Innovation: Features of the system are: (a) new referral partnerships with early education and developmental services providers and an infrastructure to support broader and easier entry into home visiting, including a centralized electronic referral system; (b) expansion and targeting of current home visiting models to serve specific high-risk groups, including families at risk of child welfare involvement or imminent adverse health outcomes; (c) improvement of perinatal mental health support through cross-training of home visitors and enhanced connections to mental health care for pregnant women and new mothers; and (d) inclusion of innovative models to reach women for whom traditional models are not effective, including women experiencing acute or recurrent substance use disorder or serious emotional disturbance in combination with each other. To support ongoing systems-level coordination, evaluation, and quality improvement efforts, DPH’s home visiting system is overseen by the Los Angeles County Home Visiting Leadership Council, comprising home visiting clients, County departments that fund or refer into home visiting, nonprofit provider agencies, evaluators, health plans, hospitals, and other partners (WIC, housing, disability, education, and philanthropy).

Results: Through this collaborative effort, DPH has been able to maximize available funding and identify new sustainable revenue streams to increase the expansion of home visiting services: over $40 million of new Prevention and Early Intervention funds, $21 million in CalWorks funding, and $5M from Substance Abuse Prevention & Control. Additionally, DPH has partnered with First 5 LA to expand Targeted Case Management billing to maximize federal revenue for DPH-funded agencies providing Healthy Families America and Parents as Teachers home visiting services. This new funding will allow DPH to increase access to home visiting services to additional 5,700 high risk women and their families throughout all regions of
Los Angeles County. Additionally, this coordinated system has resulted in new and standardized measures of family well-being and program effectiveness such as the Parents' Assessment of Protective Factors survey and depression screening. Recent data analysis shows that approximately 97% of DPH-funded home visiting clients were screened for depression. Of those screened, 12.7% were diagnosed with depression and received referrals to mental health services.

**Replicability:** Public and private collaboration is key to creating a coordinated and effective home visiting system. Working together and leveraging available resources has enabled DPH and our partners to implement key elements of our new home visiting system as we continue to integrate home visiting work with other nascent related work underway in the county, such reduction in birth disparities, developmental disability screening, and early childhood education efforts.

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