COMMUNITY-BASED PROJECT OPPORTUNITY
for MASTERS OF PUBLIC HEALTH STUDENTS

(Working Title):
“Family-focused Centralized In-Take for Maternal, Infant, and Early Childhood Home Visiting Program”
Organization Partner:
Arkansas Home Visiting Network

Office of Community-Based Public Health
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University of Arkansas for Medical Sciences
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Community-Based Project Opportunity

The following preceptorship/integration project opportunity was drafted by the Office of Community-Based Public Health (OCBPH) in collaboration with a community organization partner, and reviewed by COPH faculty member(s). The project could potentially be a preceptorship and/or integration. Therefore this document, as written, is NOT finalized for immediate implementation by Masters of Public Health (MPH) students.

The following community-based project opportunity must be fine-tuned to achieve MPH academic requirements and community-based organization (CBO) partner benefit in concert. To accomplish this, an MPH student must work with a COPH faculty advisor for the project and the CBO partner. The OCBPH will facilitate MPH student connections with faculty and CBO partner. Contact Carla Sparks at 501.526.6603.

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About CBO Partner:
The Arkansas Home Visiting Network (ARHVN) is a statewide network of organizations and programs that utilize home visiting as an intervention method to improve the lives of young children and their families in the state. The network’s goal is to raise awareness of the need for home visiting, increase the quality of home visiting and to share resources between programs to serve more families. The network was developed through the leadership of the Arkansas Department of Health, Arkansas Children’s Hospital, the Arkansas Division of Childcare and Early Childhood Education, Arkansas Children’s Trust Fund, Home Instruction Program for Parents of Pre-School Youngsters (HIPPY), Parent’s As Teachers and Following Babies Back Home.

Health Issue to be Addressed/Problem or Focus:
Subject areas: community development, collaborative program design, organizational change, family-centered services
Several different national program models, as well as 2 state-developed models are expanding with resources from the new federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grant. Typically, these programs expand by implementing the program in a given community, a geographical location within which any given program will operate. The program then serves all eligible families within that specific community. Over the years, there has been little attention paid to whether one program or another is the best fit for the community and for the family. Through the new efforts of ARHVN, we plan to change the focus. Starting with one community in Little Rock, and then expanding to 2 additional communities, we will work with one community agency to serve as a central point of intake. That is, all families eligible and prepared to participate in a home visiting program will be interviewed by one source. At that time, the determination will be made as to which program will best serve the needs of that family.

Overview of Plan/Overarching Goal(s) of Preceptorship/Integration Experience:
• Identify individual family needs.
• Identify unique strengths of national program models.
• Match family needs to the program model best suited to the family.
• Identify the challenges in creating cross-program model collaborations.

Learning Objectives:
1. Apply principles of community-based participatory public health (CBPH).
2. Learn about HIPPY roots and on-going operations.
3. Gain a basic understanding of the different national program models
4. Learn eligibility requirements for home visiting program.
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5. Develop competence in the client interview structure, process, and considerations.
6. Learn about family demographics, needs, and determinants of care.

Activities:
1. Arrange first meeting with preceptor/ARHVN leadership including orientation program goals, objectives, and activities.
2. Establish regular meeting schedule with preceptor to confer about project scope, progress, issues, etc. Observe and document family intake processes.
3. Utilize qualitative data collection strategies to determine family satisfaction with program.
4. Utilize qualitative data collection strategies to determine program model state leader needs, issues, and opportunities.
5. Provide periodic feedback to lead community agency (responsible for in-take).
6. Confer with preceptor to communicate successes and challenges with ARHVN.
7. Write a report detailing project scope, successes, challenges, and recommendations.