GEORGIA’S MIECHV PROGRAM LOGIC MODEL

**Vision:** Georgia’s children and families are educated, healthy, safe, and growing.

**Mission:** To assist Georgia communities in implementing evidence-based home visiting within an Early Childhood System of Care as a major service strategy for improving outcomes.

**Target Population:** At-risk expectant parents, children birth to age five, and their families.

**Inputs**
- Key State Collaborative Partnerships
- State Level Leadership and Infrastructure
  - Program Management Team
  - Technical Assistance Team
- Data Information System
- Established Community Systems of Care
- Federal MIECHV Program Grant Funding

**Assumptions**
- Early childhood is a critical time in a child’s life.
- All parents can benefit from support around the time of birth and during the early years of life.
- The home is the first and most important learning environment for children.
- Evidence-Based Home Visiting services have been proven effective in improving child and family outcomes.

**Activities**
- Families
  - Implement prenatal enroll. protocols
  - Implement EBHV
    - EHS-HBO
    - HFG
    - NFP
    - PAT
- State/Local Agencies
  - Develop/improve interagency partnerships
  - Develop agreements with referral resources
- Systems
  - Maintain/Expand state collaborative partnerships
  - Develop data system
  - Provide TA and training
  - Link with other EC initiatives

**Outputs**
- Families
  - Enrolling families
  - Completing HVs
  - Educating parents
  - Referring families to services
- State/Local Agencies
  - Developing partnerships
  - Developing/maintaining agreements
- Systems
  - Developing data system
  - Developing/implementing TA/training system
  - Embedding EB-HV into various state initiatives

**Short Term Outcomes**
- Maternal Health
  - ↑ HV prenatal enroll.
  - ↑ Depression screening
  - ↑ Postnatal F/U checks
- Child Health
  - ↑ Children with medical home
  - ↑ Parents receiving child safety info.
- Child Development
  - ↑ Mothers receiving prenatal care
  - ↑ Children receiving ASQ screening
- Parenting
  - ↑ Knowledge of prenatal health
  - ↑ Knowledge of child development
- Family Functioning and Self Sufficiency
  - ↑ Families screened for DV & SA
  - ↑ Families rec. info on ed. & employ.
- Care Coordination
  - ↑ Families with appropriate referrals

**Intermediate Outcomes**
- Maternal Health
  - ↑ Inter-conception health
  - ↑ Adeq.pre/postnatal care
  - ↓ Maternal depression
  - ↑ Healthy birth Intervals
- Child Health
  - ↑ Complete well-child visits
  - ↑ Immunizations up-to-date
  - ↑ Child safety
- Child Development
  - ↑ Knowledge child development
  - ↑ Appropriate expectations
  - ↑ Early ID of dev. delay
- Parenting
  - ↑ Positive parent-child interaction
  - ↑ Parenting knowledge
  - ↓ Child abuse/neglect
- Family Functioning and Self Sufficiency
  - ↓ Social isolation
  - ↓ DV & SA
  - ↑ Education/employment
- Care Coordination
  - ↑ Communication between/among providers

**Long Term Outcomes**
- Improved Maternal and Newborn Health
- Prevention of Child Injuries and Child Neglect, and Reduced Emergency Department Visits
- Improved School Readiness and Achievement
- Reduced Domestic Violence
- Improved Family Economic Self-Sufficiency

*Developed by Georgia MIECHV Leadership Team 5/11 and revised 7/11*