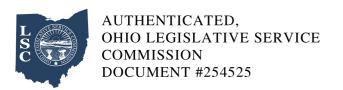


## Ohio Administrative Code

Rule 3701-8-05 Provision of home visiting services.

Effective: July 1, 2018

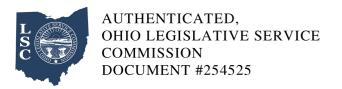
- (A) All home visiting services shall be delivered utilizing a model that has been determined evidence-based by the Ohio department of health, and/or the office of planning, research, and evaluation in the administration for children and families, United States department of health and human services or its successor. Services shall be implemented to model fidelity.
- (B) Families residing in the urban and rural communities specified in rules adopted under section 3701.142 of the Revised Code shall receive priority for home visiting services.
- (C) Only one home visitor is assigned to the family or caregiver at any given time.
- (D) After receiving a program referral, home visiting providers shall assign a home visitor and ensure that the following activities are completed before the first visit with the family:
- (1) Confirm potential eligibility for the program; and
- (2) Inform the family that the home visitor will need to view any one of the following documents to verify program eligibility:
- (a) Current women, infants and children (WIC), Ohio medicaid, or other Ohio public assistance verification;
- (b) Two most recent, consecutive pay stubs from current employment that verifies the family meets income guidelines;
- (c) Military identification; or
- (d) Other documentation which allows the home visitor to determine financial or military eligibility.



- (E) During the first visit, home visitors shall complete of the following:
- (1) Review documentation to confirm eligibility for the program in accordance with paragraph (D) of this rule and document in the family record when financial criteria are used for eligibility.

When an individual is unemployed, this shall be noted in the demographics section of the statewide data system.

- (2) Obtain written consent to participate in the program on a form approved by the director, which shall be placed into the record;
- (3) Explain the programs goals, the structure and expectations for participation;
- (4) Provide the parent or caregiver general information about the agency providing the services, as well as how to contact both the home visitor and home visiting supervisor;
- (5) Provide a copy of the home visiting participants rights and privacy practices.
- (F) Home visitors shall complete and document in the statewide data system a family centered assessment within the first thirty days after the first home visit and determination of eligibility using an assessment identified and approved for use by the department and/or the evidence-based model implemented.
- (G) Home visitors shall complete other initial and ongoing required tools in accordance with provisions contained within the provider agreement;
- (H) Home visitors shall complete a family goal plan in the statewide data system within the first sixty days after the first home visit and determination of eligibility. The family goal plan shall be reviewed and revised at least once every six months, or as requested by the family;
- (1) Each family goal plan, to include revisions, are signed and dated by primary caregiver and home visitor. Copies shall be placed in the record;

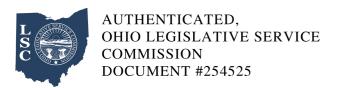


- (2) One copy of each family goal plan is to be provided to the family at no cost within ten days of the caregiver's signature.
- (I) Home visitors shall offer and facilitate scheduling of visits according to evidenced-based model fidelity standards;
- (J) Home visiting providers shall inform the centralized coordination contractor each time:

A child or family needs to change home visiting providers;

When starting services with a family who has been participating with another home visiting provider, the new provider shall conduct a family goal plan review within sixty days of the program referral.

- (K) When the referral source is professional in nature, the home visiting providers shall, with caregiver consent, provide a follow-up to the referral source on a form approved by the director within sixty days of receiving the program referral.
- (L) A family shall be exited from home visiting services in accordance with the standards of the evidence-based model being implemented, when any one of the following applies:
- (1) The youngest eligible child in the family reaches three years of age;
- (2) The child moves out of the state of Ohio;
- (3) Repeated attempts to visit are unsuccessful, as defined by the evidenced-based model being implemented, and documented in the statewide data system;
- (4) The family terminates program participation.
- (M) When a home visiting provider exits a family due to loss of contact, the provider shall send a written correspondence via email, or post mail to the last known address containing the following information:



- (1) Details of the attempts which have been made to contact the family;
- (2) This notification is the last contact attempt which the home visitor will make;
- (3) Contact information for the program; and
- (4) Information explaining qualifications and procedures for returning to the home visiting program.
- (N) Providers shall immediately communicate to the department all sentinel events involving families served in the home visiting program. Provider shall communicate via email or telephone call to their assigned program representative or the home visiting administrator.
- (O) Providers who disagree with a programmatic action taken by the department may submit a request reconsideration in accordance with the following procedures:
- (1) Submit a written request for reconsideration to the department that includes any written materials the applicant wishes to be considered so that they are received by the department no later than thirty days after the date of initiation of the programmatic action in questions;
- (2) The decision of the director under this paragraph shall be final and not subject to further administrative or judicial review.