



Ohio Administrative Code

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

Effective: January 31, 2022

(A) All home visiting services shall be delivered in accordance with the following:

(1) 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; or

(2) Utilizing a model that has been determined to be a promising-practice by the Ohio department of health or the Ohio home visiting consortium as specified in section 3701.611 of the Revised Code; and

(3) All services shall be implemented in accordance with the evidence-based or promising-practice home visiting model being used.

(B) Families residing in the urban and rural communities that have the highest infant mortality rates as specified in rules adopted under section 3701.142 of the Revised Code shall receive priority for home visiting services.

(C) Each family or caregiver will be assigned a primary home visitor. Additional credentialed home visiting staff may provide services to the family upon approval of the Ohio department of health and in accordance with the standards of the evidence-based or promising-practice model being implemented.

(D) After receiving a program referral, home visiting providers shall:

(1) Make a minimum of three attempts, on different days to call, text or e-mail the caregiver, until successful contact is made, within ten business days;

(2) Schedule the initial home visit within ten business days of the successful contact with the



caregiver; and

(3) Inform the family that the home visitor may need to view any one of the following documents to verify program eligibility, if not already verified by the central intake and referral agency:

(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) Within thirty days of enrollment, the home visitor will 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, if eligibility has not already been verified by the central intake and referral agency.

(F) During the first visit, home visitors shall:

(1) Obtain written consent to participate in the program on a form approved by the director, which shall be placed into the record;

(2) Explain the programs goals, the structure and expectations for participation;

(3) 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;

(4) Provide a copy of the home visiting participants rights and privacy practices.

(G) Home visitors shall complete and document in the statewide data system a family centered



assessment either 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 or in the timeline established by the evidence-based or promising-practice model implemented.

(H) Home visitors shall complete other initial and ongoing required tools in accordance with provisions contained within the provider agreement;

(I) Home visitors shall complete a family goal plan in the statewide data system within the first ninety days after the first home visit and determination of eligibility. The family goal plan shall be reviewed and revised in accordance with the fidelity standards of the evidence-based or promising-practice modeling being implemented;

One electronic or paper copy of each family goal plan is to be provided to the family at no cost within ten days of completion or revision of the plan.

(J) Home visitors shall offer and facilitate scheduling of visits according to evidenced-based or promising-practice model fidelity standards;

(K) Home visiting providers shall inform the central intake and referral agency 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.

(L) A family shall be exited from home visiting services in accordance with the standards of the evidence-based or promising-practice model being implemented, when any one of the following applies:

(1) The eligible child in the family reaches the maximum age allowed in accordance with the evidence-based or promising-practice model being implemented or when they reach the age of exit as specified in section 3701.61 of the Revised Code;



(2) The child moves out of the state of Ohio;

(3) Repeated attempts to visit are unsuccessful, as defined by the evidenced-based or promising-practice model being implemented, and documented in the statewide data system;

(4) The family terminates program participation.

(5) The family completes the requirements of the program based on the evidence-based or promising-practice model being implemented.

(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 communicate to the department all sentinel events involving families served in the home visiting program within twenty-four business hours of knowledge of event. Provider shall communicate via email or telephone call to their assigned program consultant or the department's home visiting administrator.