

# Survey of Child and Family Connections Managers, Service Coordinators and LIC Coordinators

In summer of 2018, the Governor’s Office of Early Childhood and the DHS Early Intervention Bureau distributed surveys to Child and Family Connections Managers, Service Coordinators and Local Interagency Council Coordinators to better understand their knowledge of home visiting programs in their area and their experiences in collaborating with home visiting on behalf of children and families.

## Who participated?

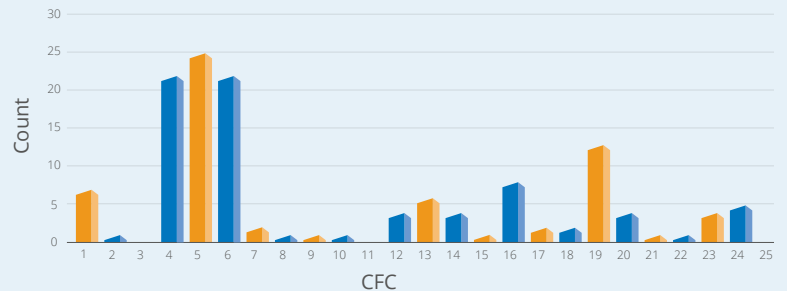
**137 providers responded.**

## Breakdown by profession:

**81% Service Coordinators**  
**12% CFC Program Managers**  
**7% LIC Coordinators**

## Breakdown by CFC:

CFCs Represented

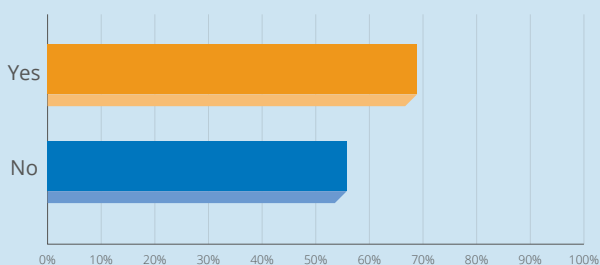


## What were the major takeaways?

**1. A majority of respondents indicated they have a strong relationship with home visiting programs in their area.**

Do you have an interactive relationship with home visiting program(s) in your CFC's area, meaning communication on a regular basis?

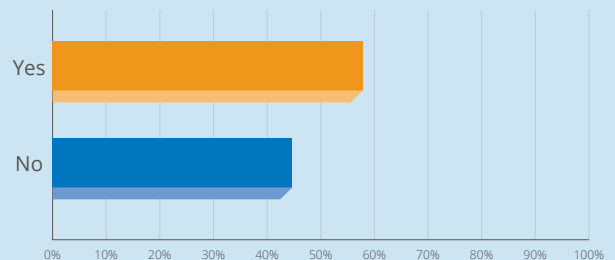
Answered: 105 Skipped: 32



**2. Respondents are largely familiar with iGrow, a resource for identifying and connecting families to home visiting services. Those aware of iGrow reported they mainly referred families to the website to look up referrals on their own.**

Are you familiar with the iGROW System?

Answered: 135 Skipped: 2

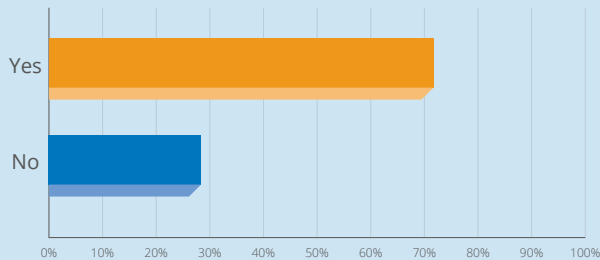


### 3. A majority of respondents refer families to home visiting services if the child is found ineligible for EI, but there were also identified barriers to making the connection.

If a child is found ineligible for EI Services, do you refer to a home visiting program in your area?

Answered: 126

Skipped: 11



## Challenges/Barriers

- No availability in the programs
- Family income too high
- Require written consent to make the referral
- Not enough knowledge of what services and programs are available
- Not enough knowledge of eligibility requirements

## Recommendations

Results from the survey of CFCs, combined with those from home visiting and EI providers, elevated a common set of challenges for collaboration between these two systems. Implementation of the following recommendations would address some of these challenges and facilitate improved connections between home visiting and EI:

1. Increase pre-service training for EI and home visiting providers on their respective systems and provide ongoing opportunities for shared professional development.
2. Share eligibility criteria and locations for home visiting and EI providers with their counterparts.
3. Convene a meeting of HV and EI funders to review and modify intake procedures and forms for easier referrals and information sharing between two systems.