HOW IS YOUR STATE COLLABORATING?

Collaboration and Coordination of the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) and the Individuals with Disabilities Education Act Part C Program

Why Collaborate?

To set a vision for stronger partnerships, collaboration, and coordination between awardees of the MIECHV and Part C programs.

MIECHV: Supports voluntary, evidence-based home visiting services for at-risk pregnant women and parents with young children up to kindergarten entry

Part C: Assists states in operating a comprehensive statewide program of early intervention services for infants and toddlers with disabilities, ages birth through age 2 years, and their families.

Systems Collaboration Opportunities

- Statewide Vision
- Shared Leadership
- Interagency Advisory Groups
- Centralized Intake, Screening, & Referral
- Collaborative Service Delivery
- Dual Enrollment
- Cross Sector PD
- Shared Data

Emergent Opportunities

- Parental substance abuse and prenatal substance abuse exposure
- Homelessness
- Child maltreatment

State	Collaboration Activity
Massachusetts	• Co-located • Dual enrollment
West Virginia	• MIECHV participation on the Part C Interagency Coordinating Council • Co-located
Connecticut	• Central intake
New Jersey	• Dual enrollment • Central intake
Hawaii	• Dual enrollment • MIECHV support to families found ineligible for Part C • Co-located
Florida	• Dual enrollment

HRSA Maternal & Child Health

IDEAs that Work