

# EARLY HEAD START

## TIP SHEET

### REVISED No. 33

Families with Multiple Children in the EHS Home-Based Option, REVISED  
June 2013

**If a family has more than one child enrolled in the EHS home-based program, is a separate 90-minute home visit required for each child?**

#### **Response:**

The *Head Start Program Performance Standards* require individualized services for each child enrolled in the program. In the home-based option, services are provided through a weekly home visit that is a minimum of one-and-a-half hours long. When a family has more than one child enrolled in EHS services, it can be challenging to meet the individual needs of each child in a 90-minute visit. A home visit with a six-month-old looks very different than a visit with a two-year-old, for example. Therefore, **staff offer each family a weekly 90-minute home visit for each child.** Staff note that home visits are planned to build on each child's unique skills and unique needs. Staff also explore each family's interest in and availability for longer or multiple home visits over a week. Then, **together, staff and families plan how home visits will be delivered to ensure that individualized services are provided to each enrolled child within a family's schedule.** Plans should be flexible to meet the needs of families and ensure that each child is adequately served. Staff document their planning with families. They communicate with administrators to make certain that staff assignments and program planning accommodate appropriate services for each child and family. Over time, staff and families monitor the effectiveness of their home visiting plan in meeting the individual needs of each child. As children grow and family circumstances change, staff and families can decide together to make changes to their home visiting plans. Changes are documented and discussed with administrators.

The *Standards* require that programs maintain an average caseload of 10 to 12 families per home visitor, with a maximum of 12 families for any individual home visitor. There is no minimum number of families on a home visitor caseload. At any given time, the number of families assigned to an individual home visitor can be lower than the average if family circumstances and/or logistical issues warrant a smaller caseload.

#### **Questions to Consider for Planning and Programming:**

- How do staff introduce the home-based program option to prospective families? What information do they provide about required program services and time commitments?
- How do staff share information about the individualization of program services with families? How do they work with families to plan home visits that provide individualized and comprehensive services to each enrolled child?
- Does/how does the program allow flexibility in adding time or visits as needed?
- Does/how does the program allow flexibility in adjusting home visitors' caseloads to ensure that each child and each family receives appropriate services and continuity of care?

#### **Performance Standards, Title 45, Code of Federal Regulations:**

- 1304.20(f)(1) Grantee and delegate agencies must use the information from the screenings for developmental, sensory, and behavioral concerns, the ongoing observations, medical and dental

evaluations and treatments, and insights from the child's parents to help staff and parents determine how the program can best respond to each child's individual characteristics, strengths, and needs.

- 1306.33(a)(5) Grantees implementing a home-based program option must maintain an average caseload of 10 – 12 families per home visitor with a maximum of 12 families for any individual.
- 1306.33(a)(1) Grantees implementing a home-based program option must provide one home visit per week per family lasting for a minimum of 1 and ½ hours each.
- 1306.33(b) Home visits must be conducted by trained home visitors with the content of the home visit jointly planned by the home visitor and the parents. Home visitors must conduct the home visit with the participation of parents. Home visits may not be conducted by the home visitor with only baby-sitters or other temporary caregivers in attendance.
- 1306.33(b)(1) The purpose of the home visit is to help parents improve their parenting skills and to assist them in the use of the home as the child's primary learning environment. The home visitor must work with the parents to help them provide learning opportunities that enhance their child's growth and development.

### **Resources:**

Early Head Start National Resource Center. *Technical Assistance Paper, 2: Early Head Start Home-Based Program Option: Recruiting, Training, and Retraining High Quality Staff*. DHHS/ACF/ACYF/HSB, 1999.

Early Head Start National Resource Center. *A Closer Look at the Early Head Start Home-Based Program Option – Webcast*. DHHS/ACF/ACYF/OHS, 2011.  
<http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/ehsnrc/Early%20Head%20Start/program-options/home-based/ACloserLookat.htm> (accessed March 14, 2012).

Early Head Start Research and Evaluation Project. *Research to Practice Brief: Early Head Start Home-Based Services*. DHHS/ACF/OPRE. 2006.  
[http://www.acf.hhs.gov/programs/opre/ehs/ehs\\_resrch/reports/homebase\\_services/homebase\\_services.pdf](http://www.acf.hhs.gov/programs/opre/ehs/ehs_resrch/reports/homebase_services/homebase_services.pdf) (accessed August 14, 2010).

Paulsell, Diane, Kimberly Boller, Kristin Hallgren, and Andrea Mraz Esposito. "Assessing Home Visit Quality: Dosage, Content, and Relationships." *Zero To Three* 30 (June 2010): 16–21.

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*This Tip Sheet is not a regulatory document. Its intent is to provide a basis for dialogue, clarification, and problem solving among Office of Head Start, Regional Offices, TA consultants, and grantees. If you need further clarification on Head Start Policies and regulations, please contact your Regional Program Specialist.*