

Home Visitors and FIT Developmental Specialists

Key distinctions, similarities, and opportunities for partnership
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Agenda

- Overview of Home Visiting (HV) and Family Infant Toddler (FIT) Program
- Role of a Home Visitor
- Role of a FIT Developmental Specialist
- Key Distinctions and Similarities
- Opportunities for Partnership
- Question and Answer

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New Mexico's Home Visiting System



- HV is available to all expectant parents and families with children birth to age 5 or kindergarten entry
- Voluntary and free of cost
- Offered through 32 programs around the state
- Based on research and evidence
- Caregiver driven and strength based
- Tailored to the cultural and linguistic needs of communities and families

New Mexico's Early Intervention System



- All children between birth and third birthday may be evaluated by a FIT provider
- Eligibility is based on medical, environmental, or developmental factors
- Entitlement Program under the Individuals with Disabilities Education Act (IDEA) Part C
- Voluntary and free
- 34 programs statewide in every county

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Role of Home Visitor

- Home visitor partners with families to promote child development and confident parenting by supporting the relationship among the family, home visitor and the community.
- Home visitor provides families with a variety of information to promote positive parent-child relationships, enhance knowledge of typical child development and connect families to community resources. Services are delivered in the home or virtually and aim to meet the goals and needs of families with children under the age of five.



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Key Responsibilities

- Home visiting is a program strategy that delivers a variety of informational, educational, developmental, referral and other support services to eligible families. Services are designed to promote child well-being and prevent adverse childhood experiences.
- Designed to promote safe, nurturing relationship between young children and their caregiver(s). Home visiting aims to promote overall child well-being and prevent adverse childhood experiences (ACEs).

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Home Visiting Services

Services are provided in the home or remotely by a trained home visitor and are designed to meet the individualized goals as set by the family. Services are guided by an appropriate curriculum and focus on a range of topic areas including:

- Child Development
- Breastfeeding Supports
- Promoting Early Literacy
- Supporting Social-Emotional Development and Well-Being
- Child and Family Safety
- Nurturing Parent-Child Relationships
- Connection to Community Resources



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Outcomes of Home Visiting Service Delivery (1)

- Supportive relationships present
- Family is safe
- Attainment of education/employment
- Appropriate health/medical care is received
- Immunization plan of family is followed
- Caregiver competence/confidence
- Stable basic relationships with children
- Appropriate prenatal practices are in place
- Positive relationships with children
- Subsequent pregnancy is planned and spaced
- Emotional health is managed
- Substance use is managed
- Father is involved with child
- Positive relationships with children

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Outcomes of Home Visiting Service Delivery (2)



- Child well-being/readiness supported
- Breastfeeding is provided for the baby
- Healthy nutrition provided for the child
- Engaged in social/spiritual communities
- Age-appropriate expectations are met

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Home Visiting Required Screenings



Home Visitors also administer a variety of screenings* to identify potential risks and support families through home visiting services and/or referrals to additional community resources. These screenings include:

- [EPDS – Edinburgh Postnatal Depression Scale](#)
- [ASQ-3 – Ages and Stages Questionnaire, Developmental Screening](#)
- [ASQ-SE – Social-Emotional Developmental Screening](#)
- [PICCOLO/DANCE – Parenting Interactions Screening Tools](#)
- [RAT/HITS – Domestic Violence Screening Tools](#)

**Home Visitors do not assess children; they screen and make referrals as appropriate*



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Curriculum/Models Utilized

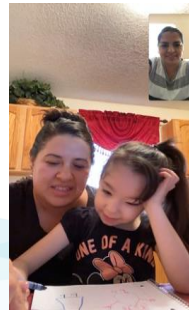
HV programs select their curriculum/model for service implementation. Curricula must support prenatal and post-partum home visits through the age of five.

Models and/or curricula currently used include:

- [Nurse Family Partnership \(NFP\)](#)
- [Parents as Teachers \(PAT\)](#)
- [First Born](#)
- [Partners for a Healthy Baby](#)
- [Nurturing Parenting](#)



Staff Qualifications and Caseload Size



- All Non-degreed personnel must work toward obtaining the Infant Family Studies Certificate within two years of hire.

- 77% of Home Visitors hold an Associate Degree or higher, and all programs must have access to a Master's level, licensed mental health professional for consultation.

- Full-time home visitors may carry a caseload of 15-28 families depending on intensity of need and frequency of visits.



FIT Developmental Specialists



FIT Developmental Specialist: Key Responsibilities

- Monitor child developmental progress
- Provide coaching to key family members on how to support a child's learning, particularly if the child is experiencing developmental delay or atypical developmental patterns
- Provide targeted instructional strategies through coaching to support a caregiver's ability to intervene during daily routines



Developmental Specialist Level I Basic

Qualifications

- GED and completion of the 45-hour entry-level course
- Must maintain an Individualized Professional Development Plan (IPDP) and become re-certified every three (3) years

Scope of Service

- Billable Services Including:
 - Early Intervention sessions with families
 - Collaborative Consultation
 - Transdisciplinary Team Approach Meetings



Developmental Specialist Level I Advanced

Qualifications

- Associate's degree in early childhood or a related field
- Must maintain an Individualized Professional Development Plan (IPDP) and become re-certified every three (3) years

Scope of Service

- Billable Services Including:
 - Early Intervention sessions with families
 - Collaborative Consultation
 - Transdisciplinary Team Approach Meetings



Developmental Specialist Level II

Qualifications

- Bachelor's degree in early childhood or a related field
- Must maintain an Individualized Professional Development Plan (IPDP) and become re-certified every three (3) years

Scope of Service

- Billable Services Including:
 - Early Intervention sessions with families
 - Collaborative Consultation
 - Transdisciplinary Team Approach Meetings
 - Comprehensive Multidisciplinary Evaluation

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Developmental Specialist Level III

Qualifications

- Master's degree or above in early childhood or a related field
- Must maintain an Individualized Professional Development Plan (IPDP) and become re-certified every three (3) years

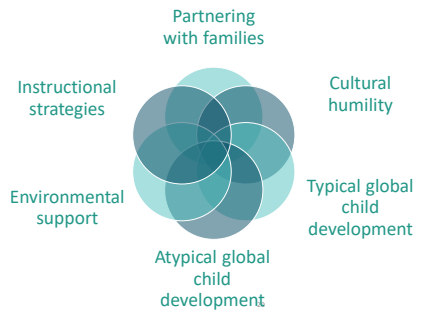
Scope of Service

- Billable Services Including:
 - Early Intervention sessions with families
 - Collaborative Consultation
 - Transdisciplinary Team Approach Meetings
 - Comprehensive Multidisciplinary Evaluation

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FIT Developmental Specialist: Key Skills



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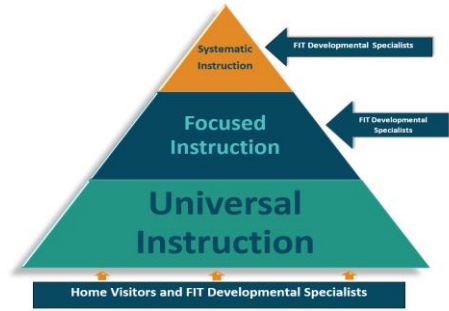
Key Distinctions

Home Visitor:

Works with the family prenatally until the child is five or in kindergarten entry. Family plans include goals specific to the family needs and include determination of the frequency of services. As families near program completion, or express desire to end services, a transition plan is developed. The transition plan will identify ongoing family goals and may include a referral to other early childhood services (i.e., PreK, Head Start, Early PreK, Early Head Start, FIT, Child Care, etc.).

FIT Developmental Specialist:

Provide coaching to key family members or caregivers to ensure they are competent and confident at helping their child reach the goals that are important to them.



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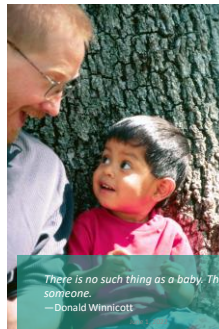
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Key Distinctions in Service Delivery

Category	Home Visiting	FIT Developmental Specialist
Age Range	Prenatal to Five	Birth to Third Birthday
Eligibility	Prenatal to kindergarten entry	Child must meet specific developmental, medical, or environmental criteria to qualify
Funding Sources	State General Funds, Medicaid, Federal Funds	State General Funds, Medicaid, Private Insurance
Cost to Families	Free	Free
Service Location	Face to face/ telework	Home, Child Care, or Community Setting
Entitlement?	No	Yes, under the Individuals with Disabilities Education Act (IDEA)
Main Goal	Promotion and Prevention	Prevention and Intervention

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There is no such thing as a baby. There is a baby and someone.
— Donald Winnicott

Opportunities for Partnership

Families can receive both services simultaneously

- Home Visitors and FIT Developmental Specialists can be wonderful supports to each other and to the family
- Inviting Home Visitors to Individual Family Service Plan (IFSP) meetings
- Inviting FIT Developmental Specialists to join a Home Visiting session
- Sharing Resources



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Specific Areas of Expertise

Home Visiting	Both	FIT Developmental Specialist
Infant Mental Health (special training or endorsement required)	Partnering with Families	Atypical development
Parenting	Typical Child Development	Environmental Intervention
Community Resources	Parent/Child Relationships	Child-Specific Intervention
Breastfeeding and lactation support		Parent and caregiver coaching
Promoting Early Literacy		Operating as a team with other disciplines (PT, OT, SLP, etc.)
Child and Family Safety (car seat, safe sleep, first aid, CPR, infant massage, childbirth classes, shaken baby syndrome education, HSE Resource and Referral)		IDEA Part C and the Rights and Safeguards that every family is entitled to under the law
Infant Family Studies		

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