Overview and Table of Contents

Pregnant or newly parenting families with substance use concerns can benefit from referrals to community resources to help them thrive and address their increased risk for adverse outcomes. Federal and NH state laws also require that health providers support these families in developing a “Plan of Safe/Supportive Care” (POSC), “to ensure appropriate referrals are made and services are delivered to the infant and affected family members”\(^1\). Currently even when POSC documents are developed, many families never connect with the services and supports for which they accept referrals. The following includes resources local health providers and community partners can adapt to help families get the supports they want and need.

The below materials often highlight referrals to Family Home Visiting programs – holistic voluntary prevention services available statewide – but many of the resources apply to referrals for a variety of community supports. The pilot project through which these materials were created focused on referrals to Family Home Visiting programs – in particular, NH DHHS-contracted Healthy Families America and Comprehensive Family Support Services providers – because these programs can support families in many direct ways and help them connect with other resources (i.e. implement a Plan of Safe Care).

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For more information about the 2020 DHHS SEI Referrals Pilot, visit the [NH POSC Webpage](http://www.gencourt.state.nh.us/rsa/html/X/132/132-10-e.htm).

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\(^1\) Source: *NH SB 549: RSA 132:10-e and f*, [http://www.gencourt.state.nh.us/rsa/html/X/132/132-10-e.htm](http://www.gencourt.state.nh.us/rsa/html/X/132/132-10-e.htm)
On October 27, 2020, six New Hampshire moms joined in a conversation to talk about their experience being pregnant and having a baby born exposed to substances. The purpose of this discussion was to inform a pilot project seeking to connect families using substances during pregnancy with family support and strengthening services during pregnancy and shortly after.

STRONG MOMS
Moms talked about the positive things that happened during their pregnancy: having supportive partners and families, friends, doctors, therapists, faith leaders, home visiting and parent education support provided by family resource centers.

The moms in our discussion recognized and celebrated their strength, independence, self-love, sobriety, employment, and ability to positively engage with those around them.

WHAT YOU TOLD US
I’m an expert in ME
Moms know their own needs best. It’s important for people working with prenatal families (and families with infants) to make early referrals and develop plans based on the needs I identify for me and my baby. I need you to celebrate my successes and know that I’m doing the best I can. Please listen to my goals and talk to me about why you think the referrals we’re making are important. We’re a team!

Sooner is better than later!
Having a baby can be a really stressful experience - especially facing some of today’s challenges. The sooner we can connect so I can learn about the services available to help me and my baby, the better. I don’t want to feel overwhelmed with referrals after the baby is born.

I want to feel supported in choosing different paths, such as MAT or counseling to help treat my illness. I also need time to consider all the options and think about the impacts of my choices.

The stigma (and fear) is REAL
When the Plan of Safe Care is offered to us late in our pregnancy or right after delivery, it can feel like a punishment. Share the plan with us early in our pregnancy so it feels more a part of normal prenatal planning, and give us time to understand how it will impact us after the baby is born. Everyone can use support after having a baby, and it helps us feel less isolated to know that.

Make sure I know about general parent support opportunities AND peer recovery programs and other ways to grow my positive social connections. I may need specialized supports, but I’m also just a regular mom learning how to do a really hard job.

This shouldn’t all be on me. Dads can also struggle with substance use and may need parenting support and recovery resources to navigate challenges and keep our baby safe now and in the future. Dads are important and should be part of this planning.

Help us prepare for what we might encounter, and teach me about the things I’ll need to do to bring my baby home safely. Hospitals and doctors don’t always have the same processes. It’s important for me to know what happens if my baby is born with a substance in their system, so I can mentally prepare for what comes next.

Please don’t assume
Just like I don’t want you to assume my illness defines me and my ability to be a mom, I don’t want you to assume I have all the tools I need. Getting into the programs I need to help me stay healthy and keep my baby safe can be difficult. Sometimes it might be hard for me to follow through with the important referrals we make together, so please check in to ask me about how they’re going. I’m working hard to maintain my sobriety and have a healthy pregnancy. Having a hard time getting signed up for a program I know I need may be a trigger and could jeopardize my recovery.
“How to” Guide: Implementing Family Home Visiting (FHV) Referrals as part of the POSC

Pregnant or newly parenting families with substance use concerns can benefit from referrals to community resources to help them thrive and address their increased risk for adverse outcomes. Federal and NH state laws also require that health providers support these families in developing a “Plan of Safe Care” (POSC), “to ensure appropriate referrals are made and services are delivered to the infant and affected family members”. Family Home Visiting (FHV) programs are voluntary prevention services that support families directly and help them connect to other services and resources they may need (e.g. help implementing a Plan of Safe Care). Below is a sample process prenatal clinics and birthing hospitals can use to connect families to FHV as part of the POSC.

- NH’s DPHS funds Family Resource Centers and other agencies to provide the Healthy Families America model of Family Home Visiting statewide.
- HFA NH has a prenatal focus and strong evidence of preventing maltreatment & adverse childhood experiences. It offers RN visits, direct parenting supports (e.g., safe sleep education), and can connect families to concrete needs (e.g. diapers, pack & plays) & other resources (e.g., WIC, ESS).
- Most families with perinatal SUD are eligible for HFA. But if HFA isn’t the best fit, agencies will connect a family with other resources.

Sample Step-by-Step guide for referring a patient with Perinatal SUD to Family Home Visiting (FHV):

<table>
<thead>
<tr>
<th>1. Intro POSC &amp; Offer FHV to patient</th>
<th>2. Warmly Refer patient to FHV</th>
<th>3. Persistently Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Offer FHV referral by emphasizing how it can help patient reach their goals and connect families to other supports identified on their POSC. See suggested talking points below.</td>
<td>□ Determine appropriate Family Home Visiting agency using below catchment area cheat sheet or NH Children’s Trust search tool.</td>
<td>□ If parent doesn’t initially accept, consider opportunities to re-offer, such as when a specific need emerges or circumstances change (e.g., lost housing or grandparent leaves). Treat referral as a conversation.</td>
</tr>
<tr>
<td>□ Share FHV brochure &amp;/or FHV video with patient</td>
<td>□ If patient hasn’t accepted services but is willing to meet FHV staffer to learn more, invite FHV agency staff to join a few minutes of upcoming appointment to further explain FHV (in-person or by phone or video).</td>
<td>□ Ask family if they need additional help connecting with FHV agency.</td>
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<tr>
<td>□ Ask patient if FHV agency staff can virtually join for a few minutes of upcoming appointment so they can intro themselves &amp; the program (this can occur before patient accepts/declines the service as part of the referral “pitch” or after they accept the service as a “warm handoff”)</td>
<td>□ If patient already accepted services: Help patient complete, sign, and submit appropriate providers’ referral form. Request FHV agency staff join upcoming patient appointment for a warm handoff.</td>
<td>□ Close the loop w/ FHV agency to confirm family enrolled, OR help engage family.</td>
</tr>
<tr>
<td>□ If patient declines Family Home Visiting referral:</td>
<td>□ If joint appointment isn’t possible, use other warm handoff techniques. E.g., help patient make plan to connect with FHV agency; ensure patient knows name and number of who will be calling them from FHV agency.</td>
<td>□ Appoint a staff person to keep track of all the practice’s active Family Home Visiting referrals and regularly check in (e.g. standing 10 min. phone call) with the FHV agency to a) confirm enrollment or b) coordinate warm handoffs at upcoming patient appointments.</td>
</tr>
<tr>
<td>□ Ask “Why” to inform future offers</td>
<td>□ Consider if additional info or follow-up discussion with others (e.g., peer, clinician, FHV staff) might address their concerns</td>
<td>□ Coordinate with hospital social worker on POSC development and in-progress referrals</td>
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See NH POSC webpage for an editable version of this guide you can adapt for your region.
Evidence-based strategies for how to effectively offer Family Home Visiting referrals

• Give family context for what you’re offering—e.g. offer to virtually connect them to a Family Home Visiting staffer, offer a brochure, share an intro video
• Customize your referral offer to the specific family and stress relevant desirable benefits of Family Home Visiting, especially the concrete supports
• Avoid language that implies shame or risk factors, or any suggestion there is one path to successful parenting. Emphasize that FHV is nonjudgmental.
• Share (anonymous) stories of families you’ve worked with in the past who have appreciated Family Home Visiting and why
• Highlight how Family Support Specialists can support the parent’s strengths—they offer tailored information and suggestions based on family goals.

Suggested Talking Points:

• Parenting is a tough job. Babies don’t come with instruction manuals. Every parent could use a little support. Family Home Visiting programs offer child development expertise, referrals, and general support to help new parents with whatever they need, including:
  o Connecting with needed resources, e.g. diapers, pack & plays, window guards, Medical insurance, Childcare, Housing, Healthcare, Jobs, and more.
  o Tips & activities to support healthy child development and connections to parenting groups and other peers
  o Advice on how to keep you and your baby healthy and thriving — some (including NH’s HFA program) even offer visits from a Registered Nurse
  o Someone to talk to about the struggles, challenges and the joys of being a parent; someone who is 100% on your family’s team and there to help
• Family Home visiting is free and voluntary; it is NOT part of DCYF
• Visits happens at home, or wherever is most convenient and comfortable for you. They can happen as little as once or for up to several years
• Home visiting is organized around you, your goals for yourself and for your child—you drive what happens in a home visit
• Family Support Specialists are non-judgmental people who will work with you and focus on your strengths and the love you have for your baby
• NOTE: The Healthy Families America Family Home Visiting program is NOT the NH Healthy Families MCO (families often confuse the two).

Sample Pitch Scripts

Focusing on Parent: Being a parent can be stressful. But, it can also bring you joy and be your most rewarding job. Working with a Family Support Specialist can help. It’s free, voluntary and takes place in the comfort of your own home. A Family Support Specialist understands the challenges of being a parent and is someone you can talk to about the stresses and joys of being a new parent. A Family Support Specialist is a resource you can rely on for support and advice. What happens during a home visit is organized around your goals and priorities. They will also talk with you about how your baby is growing and what you can do to get your baby off to a healthy, strong start, ready for school and ready for life. Can I introduce you to a Family Support Specialist to learn more?2

Focusing on Child Development: Babies don’t come with instruction manuals, but being a parent can be one of the most rewarding jobs you have. Family Home visiting is free, voluntary. A Family Support Specialist can meet you where you are—in your home and based on your goals. Family support specialists can help you tap into your strengths and love for your baby so you can be the best parent for your baby. Family support specialists can provide information and support during pregnancy and throughout a child’s earliest years—a critical development period. They will talk with you about how your baby grows, how to bond with your baby and how to help your baby stay healthy and get off to a strong start. Can I introduce you to a Family Support Specialist to learn more?3

2Source: Illinois Home Visiting Collaborative igrow, “Talking to parents and partners about home visiting”, Pitches were developed based on data collected from a MIHOPE implementation study, which evaluated MIECHV-funded programs in states, through a randomized control trial. Note: The study showed 51% of mothers who enrolled in home visiting reported that their decision to participate was based on wanting general advice and support from the evidence-based models.
3 Source: ibid. Note: One-third of women who enrolled wanted to learn how to be better mothers and get parenting support; one-fourth of women wanted to learn ways to improve their children’s health, support their children’s development, and find good child care.
EXAMPLE REFERRALS CHEAT SHEET: Referrals to HFA Family Home Visiting from Concord Hospital

HFA Family Home Visiting Providers for the towns in which most Concord Hospital patients reside*

<table>
<thead>
<tr>
<th>Hillsborough County (603-518-4390)</th>
<th>Merrimack County (603-518-4390)</th>
<th>Belknapp-Merrimack CAP Belknapp County (603 528-5334 ext 125)</th>
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<tbody>
<tr>
<td>Amherst</td>
<td>Manchester</td>
<td>Pelham</td>
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<td>Antrim</td>
<td>Greenfield</td>
<td>Allenstown</td>
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<tr>
<td>Bedford</td>
<td>Hancock</td>
<td>Danbury</td>
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<td>Bennington</td>
<td>Hillsborough</td>
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<td>Brookline</td>
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<td>Deering</td>
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<td>Francetown</td>
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<td>Webster</td>
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<td>Boscawen</td>
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<td>Epsom</td>
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<td>Newbury</td>
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*NH’s DPHS funds Family Resource Centers and other agencies to provide the Healthy Families America model of Family Home Visiting statewide. To determine other towns’ providers, use NH Children’s Trust town-by-town directory of HFA and other FHV programs: www.nhchildrenstrust.org/local-services

How to schedule a HFA Family Support Specialist to join a prenatal appointment for a warm referral “handoff”:

- If you are planning to offer a patient HFA, you can contact the appropriate provider agency in advance of your meeting with the patient and ask if the agency is available to virtually join your patient meeting to introduce themselves (and potentially schedule an Intake appointment) with the patient.

- Reach out to: Carolyn George at HVreferrals@waypointnh.org, (603)518-4390 for Waypoint referrals & Ryan Marchand at rmarchand@BM-Cap.org, (603) 528-5334 ext 125 for Belknap-Merrimack CAP referrals to coordinate. Use NH Children’s Trust directory to find contact info for other regions and providers.

- While meeting with the patient, ask them if you can conference in the HFA Family Support Specialist to introduce themselves (& possibly schedule a future Intake appt). If they say yes, call or video conference in the HFA Family Support Specialist.

- If the above isn’t possible, email submit the patient’s signed referral form to the appropriate HFA agency after meeting with the patient. If there is time before the patient discharges from the hospital, try to arrange a warm handoff at a later time.

- If not, alert the family’s PCP that a HFA referral has been initiated that they should follow up on (via sending POSC & instructions on HFA referral follow-up)

Supporting Resources

- Waypoint and Belknap-Merrimack CAP Healthy Families America program referral forms & marketing brochures
- Waypoint Concord area Family Home Visitor intro video (~1 minute) bit.ly/WaypointHFA-Concord
- NH DHHS Family Home Visiting flyer and explanatory video (~1 minute): www.youtube.com/watch?v=xMN9k1m_O9U
Tip-Sheet: Effective Referral “Handoff” Practices

Key elements of a Facilitated Referral

- **Helping family** with provider’s referral and/or application process (e.g. forms, scheduling Intakes, etc.)
- **“Warm handoffs”**: Individualized, person-to-person connection between referral source, service provider, and family
- **Closing-the-loop**: Coordinate with provider agency/resource to help them connect with family
- **Barrier busting**: Help family overcome barriers and adapt referral to their needs
## Tip - Sheet: Best Practices for Approaching Referrals Conversations

<table>
<thead>
<tr>
<th>Tactic</th>
<th>Example Response</th>
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| **1. Empower the parent as the decision-maker** by asking for their permission at the beginning and throughout the conversation. | • “Can I tell you about some programs that are available to your family?”  
• “Would you be open to talking about programs that can help ensure your child’s healthy development OR that can help support you as you balance all your responsibilities?”  
• “Do you think that this may be helpful?”  
• “These programs are voluntary. If you give it a try, you can decide later if it’s a good fit.” |
| **2. Focus on building a connection** by listening to the parent, and save “information” until the end of the conversation. Listen for caregivers to share their goals. | • “I have some ideas about programs that may be helpful, but before I jump into those, can you tell me a little more about what’s going on with your family right now?”  
• “I understand that ____ has been challenging. Can you tell me more about that?”  
• “You don’t have to decide now. Can I check in again soon to see what you’re thinking?” |
| **3. Promote belief in the client’s abilities as a parent** and start from frame that the parent is the expert. Building self-esteem and confidence can be helpful drivers of change. | • “I can tell that you care a lot about your child’s healthy development.”  
• “You are the expert on your child. This resource will build on your strengths.”  
• “I hear that your child is doing well, and you feel they are on track right now. This is great! The ____ program/resource is designed to ensure this progress continues so that your child is able to reach their fullest potential both now and in the years to come in school.” |
| **4. Seek to understand family context, validate concerns, and think of addressing the family’s most urgent need first.** | • “I hear you talking a lot about feeling like you don't have a lot of time, sounds like you’ve got a lot on your plate right now.”  
• “Tell me what areas you’re interested in working on? What would help you?”  
• “Part of our team’s work is connecting families to community resources who can help with everything from accessing diapers and Medical Insurance to finding a job or Recovery resources. While I’m working with your family, I’d like to be useful to you. How can I help?” |
| **5. Normalize the services / need for support.** | • “These services are available to all/many families.”  
• “Many families I’ve worked with have told me they & their kids have benefitted from this programs.”  
• “All children, including those on a typical development track, can benefit from these services.”  
• “We all have times when we need more support.” |
<table>
<thead>
<tr>
<th>Concern</th>
<th>Ways you Might Respond</th>
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</table>
| **A. Caregiver feels overwhelmed**  
e.g. Time Concerns, “Too many services in place”, Anxiety about a big commitment;  
Immediately say no to referral | • “Shrink the ask” – pitch Family Home Visitors as a local resource expert family can meet with as little as one time to get help connecting to resources (e.g. diapers or housing supports) or as long as it takes to meet their needs  
• Explain Family Home Visiting will adapt to the family’s schedule and can meet with them in the community or the home  
• Emphasize benefits of Family Home Visiting (or other program) that are distinct from their other providers/resources – e.g. potential for long-term support, resource connections, child development  
• Consider pausing the referral conversation until other service providers withdraw or until later in your work together  
• E.g. “They’ll adapt to your schedule and what you want to work on. You can stop at any time. And they’ll help you with activities that can enhance family time – so they’ll spend time with you and your child together”. |
| **B. Caregiver doesn’t see the value of Family Home Visiting or other support programs (how it will help them meet their goals)** | • Pause and don’t just rely on your own assessment of the family’s needs. Ask the family for their sense of what they need  
• Then, explain how programs can be customized to fit their specific needs and goals  
• Emphasize the more concrete help Family Home Visiting can provide (e.g. accessing Baby supplies, Insurance, Job search)  
• Ask if you can intro them to the Service Provider so they can hear more about what the program provides  
• E.g. “What are your goals for your child? To make friends, be in sports, get good grades? What’s important to you? . . One of the reasons I think you might be interested in Family Home Visiting is _____ [insert reason customized to their goals]” |
| **C. Caregiver is hesitant to engage in service they consider associated with the State and/or DCYF surveillance** | • Be honest, but clarify: These are state-funded services, but are separate from DCYF (funded by other DHHS divisions).  
• Clarify that they’re run by community-based non-profit organizations who only share info with DCYF if parents sign a Release of Information (or if they have a Abuse/Neglect concern same as all NH residents’ mandated reporter status)  
• E.g. “A home visitor’s role is to help you prioritize and set and meet goals. They want to see you succeed! They’re no more required to “report” to DCYF than any other adult in NH (you, your mom, your neighbor).” |
| **D. Caregiver fears stigma or judgment of engaging in family support programming** | • Ask if the caregiver is open to you introducing them to the provider’s staff to show (not tell) they’re friendly & supportive  
• Normalize the service: Nothing has to be “wrong”. Many families find Family Home Visiting helpful for things like how to prep for school, how to potty-train, connections to play groups & other parents and community groups  
• Affirm caregiver’s strengths – explain Family Home Visiting is about building on those strengths  
• E.g. “It’s not that I think you’re a bad parent. I think you have lots to offer! It’s just that it ‘takes a village’. So many families are isolated these days & parents have so much to juggle, we want to help with that – everyone could use help sometimes.” |
Tip-Sheet: Helping families find and connect to the right resources

Find the best resource to address the client’s most important or prioritized need

- Work with the client to find a resource that is a good fit. Consider:
  - Can the resource address multiple needs?
  - Is the location accessible to the client?
  - Do they offer services in the client’s primary language? In a way that is responsive to the client’s culture?
- Contact the resource with questions about whether it is a good fit.

Use the most handoff strategies possible, minimize client’s burden of navigation

- Talk to the client about what will make them more comfortable and likely to engage. Consider:
  - Can you join the client for the initial meeting with the resource?
  - Can you call the resource ahead of time to lessen the client’s burden of information-sharing?
  - What information can you share with the resource to prepare them to meet the client’s needs?

Follow up and take action to ensure the family is successfully “enrolled” in the service

- Talk to the client or resource to find out if the client was able to successfully enroll
- Call or email the resource if there were barriers preventing the client from enrolling
- Identify a new resource to meet the prioritized need if the first resource doesn’t pan out
Appendix: Additional Resources for Implementing Plan of Safe Care Referrals to Family Home Visiting Programs

**HFA Family Home Visiting and other Family Support programs** offered by Family Resource Centers can help families navigate to or stay connected with additional Plan of Safe Care resources. They can work with families starting prenatally and for up to several years.

- Family Home Visiting/Family Support Style Programs can support families directly and connect them to many other resources (e.g. implement Plans of Safe Care)
- Healthy Families America (HFA) and CFSS-funded programs (which have different names regionally) are offered by NH DHHS statewide, often at Family Resource Centers
- Early Head Start provides similar services in some parts of the state as do other non-DHHS funded programs
- Additional Pregnant & Parenting Services and Supports: [List & Map](#)

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**Call to find a Home Visiting Program Nearest You**

**Agencies:**
- *Indicates Healthy Families America Only
- **Indicates Comprehensive Family Support Services Only

- **Granite VNA**
  - (603) 832-8046
- **Children Unlimited**
  - (603) 447-6356 ext. 0
- Community Action Partnership of Strafford County
  - (603) 435-2500
  - (603) 528-5334 ext. 125
- **Families First**
  - (603)422-8208
- **Family Resource Center at Gorham**
  - (603) 466-5190
- **Family Resource Center of The Lakes Region**
  - (603) 524-8811
- Home Healthcare Hospice & Community Services
  - (603) 352-2253
- TLC Family Resource Center
  - (603) 542-1848
- Waypoint
  - 1(800)640-6486 or (603)518-4000
  - *Waypoint provides HFA in Rockingham County

Map current as of May 2021
**Example Roadmap for developing local POSC referral relationships: 2020 DHHS SEI Referrals pilot focusing on connections to local Family Home Visiting programs**

<table>
<thead>
<tr>
<th>Pre-Pilot</th>
<th><strong>Phase 1: Setup Pilot</strong></th>
<th><strong>Phase 2: Design Referral Pathway</strong></th>
<th><strong>Phase 3: Test and refine Referral Pathway</strong></th>
<th><strong>Phase 4: Sustain collaboration</strong></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Strong history of Concord Hospital, DCYF, and local service providers meeting to build relationships; but still many families not connecting to supportive prevention services</td>
<td>Develop standard practices for more consistent, higher quality referral connections</td>
<td>Regularly close-the-loop on active referrals, learn what works best for families, rollout to staff</td>
<td>Setup sustainable ongoing collaboration structures</td>
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<td></td>
<td>Identified and convened appropriate regional service providers</td>
<td><strong>Timing:</strong> When are the best moments in a SEI family’s perinatal journey to offer Family Home Visiting?</td>
<td>• Regularly check-in on in-progress referrals to prevent families from falling through the cracks</td>
<td>• Maintain short ongoing meetings to focus on closing-the-loop for active referrals</td>
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<td></td>
<td>• Decided to focus on Family Home Visiting (FHV) referrals given care coordination element</td>
<td><strong>Referral Offers:</strong> What are the best ways to offer FHV? How can we effectively explain the service, answer questions, &amp; incorporate families’ input?</td>
<td>• Codify standard practices decided on in Phase 2; share with frontline staff</td>
<td>• Continue using and evolving tools and practices</td>
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<td></td>
<td>• Developed 3 working groups based on referral relationships (local home visiting providers met with 1. Concord Hospital/prenatal clinics, 2. Concord DCYF DO, 3. Laconia DCYF DO)</td>
<td><strong>Handoff:</strong> How can we work together to best offer and connect families to services?</td>
<td>• Frequently review enrollment data and case practices to figure out what works</td>
<td>• Institutionalize collaboration and referrals tracking infrastructure</td>
</tr>
<tr>
<td></td>
<td>• Setup meeting cadence</td>
<td><strong>Tools:</strong> What tools can make referrals better and easier?</td>
<td>• Troubleshoot operational challenges</td>
<td>• Monitor if services are working well for families; consider similar work with additional services</td>
</tr>
<tr>
<td></td>
<td>• Shared existing tools (e.g. referral forms, marketing materials)</td>
<td><strong>Follow-up/ Close-the Loop:</strong> How can we work together to ensure referred family actually started services?</td>
<td>• Identify solutions and implement changes to improve results</td>
<td>• Involved DCYF Strength to Succeed Peer Recovery Workers as advisors and additional key service providers in this work</td>
</tr>
</tbody>
</table>

Pilot Participants sought input from their communities of families

**Involved DCYF Strength to Succeed Peer Recovery Workers as advisors and additional key service providers in this work**

**DHHS led a Focus Group with women with lived experience of substance use while pregnant**
Tools to Support Referral Offers: HFA Brochures, Info Sheets, and Explainer Videos

Healthy Families America - NH can help your family:
- Prepare to bring your baby home from the hospital
- Have a healthy pregnancy and delivery
- Feel confident parenting
- Cope with the stress of raising a family
- Access information to keep your baby healthy and safe
- Get resources and help, like baby equipment
- Connect with other parents
- Understand your baby’s emotions, needs, cues and behaviors
- And so much more!

Whether you are pregnant or already have a new baby at home, Healthy Families America - NH staff are there for you. The best part is YOU get to pick the:
- Type of help
- Type of service
- Time and place to meet

As a new parent, when your child is born you don’t know what to do. When I got involved with Healthy Families America - NH, it was so comforting. I felt like I wasn’t alone.

To search for a service in New Hampshire, visit www.HealthyFamiliesAmericaNH.org.

Find digital versions of these brochures/info sheets at: https://www.dhhs.nh.gov/dphs/bchs/mch/home.htm. Request physical copies by contacting the program coordinator at (603) 271-4566 or MIECHV@dhhs.nh.gov.

Talk to your local provider agency

Local HFA and other Family Home Visiting Providers often also have custom marketing materials that may even feature the specific service providers with which a family would work

You could also request they help you develop other helpful referral tools (e.g. can one of their staff record a short video introducing themselves and their program that you could show patients?)
You know what is best for your family but you still might have questions along the way.

What is Healthy Families America - NH?
Healthy Families America - NH is a home visiting service available starting when you find out you are pregnant through your child’s 3rd birthday. It is non-judgmental support – when you want it – where you want. Healthy Families America - NH is free, convenient, voluntary and flexible.
Healthy Families America - NH can help your family:

- Prepare to bring your baby home from the hospital
- Have a healthy pregnancy and delivery
- Feel confident parenting
- Cope with the stress of raising a family
- Access information to keep your baby healthy and safe
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“As a new parent, when your child is born you don’t know what to do. When I got involved with Healthy Families America - NH, it was so comfortable. I got answers without judgment. I felt like I wasn’t alone.”

To search for a service in New Hampshire, go to www.HealthyFamiliesAmericaNH.org or call 2-1-1 NH.
Parenting Support for ALL NH Families

Many different types of services are available to guide and assist parents-to-be and parents of young children in the early stages of raising a family. These include Healthy Families America – NH, Family Resource Centers, Comprehensive Family Support Services, Head Start, Early Head Start, pre-school and more. The services are all slightly different but share the same goal of promoting healthy pregnancies, positive birth outcomes and creating safe and nurturing environments for children and families to thrive. To learn about Healthy Families America - NH and other services, visit www.HealthyFamiliesAmericaNH.org or call 2-1-1 NH.

Helping Families Thrive

Healthy Families America – NH has trained family support specialists who visit families in their homes or other locations the family may choose to offer a nationally recognized, evidence-based service. Research shows that home visiting beginning prenatally and continuing through the first few years of a child’s life has a positive impact on children and families.¹

Support During & After Pregnancy

Healthy Families America – NH helps families who may be first time parents, young parents, parents who have served in the armed forces, or families who need a little extra help and support. While Healthy Families America – NH family support specialists start working with families the moment they find out they are pregnant through their child’s 3rd birthday, there are other family support and strengthening services to help families. Visit www.NHHomeVisiting.org to search a database for the variety of services in NH, the eligibility criteria and locations.

Helping One Family at a Time
Healthy Families America – NH provides assessments for routine child development, safety and postpartum depression as well as parent education, support and resource connection. Every program is a little different. Some programs may help with transportation to appointments, connection to peers and community or assistance with baby equipment.

Support Where Families Want It, When They Want It
Healthy Families America – NH is flexible, confidential, convenient and FREE. Families pick where and when they want to meet and what to work on. Families receive individualized family support and coaching that helps them meet their parenting goals based on personal motivation.

Always Voluntary, Never Mandatory
All families in Healthy Families America – NH choose to participate. As a provider, you can make a direct referral by calling a program in your area. It is very helpful if you make the initial referral to get the process started. Families can also call a program directly.

Collaborating with Patients, Clients and Community
Healthy Families America – NH can help families:
- Prepare to bring their baby home from the hospital
- Have a healthy pregnancy and delivery
- Feel confident as new parents
- Cope with the stress of raising a family
- Access information to keep their baby healthy and safe
- Find resources such as baby equipment
- Connect with other parents
- Understand their baby’s needs
- And so much more!

Call to find a Healthy Families America - NH Program Nearest You

Agencies:
- Community Action Program
  Belknap-Merrimack Counties, Inc.
  603-528-5334 EXT 125
- Waypoint
  1-800-640-6486 or 603-518-4000
- Community Action Partnership of Strafford County
  603-435-2500
- TLC Family Resource Center
  603-542-1848
- Family Resource Center
  603-466-5190
- Home Healthcare Hospice & Community Services
  603-352-2253
- Granite VNA
  603-832-8046

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1 minute YouTube Videos created by NH Division of Public Health Services to explain Family Home Visiting

Youtube Links

- “Emily’s story”: features a single mother referred to Family Home Visiting by her doctor - [www.youtube.com/watch?v=xmN9kIm_O9U](http://www.youtube.com/watch?v=xmN9kIm_O9U)
- “Ashley’s story”: features a 2 parent household having a second-child - [www.youtube.com/watch?v=_0jJQL9YtK4](http://www.youtube.com/watch?v=_0jJQL9YtK4)
- “Joseph’s story”: features a single dad - [www.youtube.com/watch?v=cNdTCTAYk1E](http://www.youtube.com/watch?v=cNdTCTAYk1E)
- “Diane and Louie’s story”: features grandparents caring for a newborn - [www.youtube.com/watch?v=CLQ-v2DXqGk](http://www.youtube.com/watch?v=CLQ-v2DXqGk)