

Healthy Families America 12 Critical Elements

1. Initiate services prenatally or at birth.
2. Use a standardized assessment tool to systematically identify families who are most in need of intensive home visitation services. The tool assesses the presence of various factors associated with increased risk for poor childhood outcomes, including child mal-treatment.
3. Offer services voluntarily and use positive persistent outreach efforts to build family trust.
4. Offer services intensively (at least once a week). Have well defined criteria for decreasing services over time. Offer services long term (5 years).
5. Services are culturally sensitive. Staff and materials used will reflect the diversity of the population served.
6. Services focus on supporting parents, promoting healthy parent child interaction and assuring healthy child development.
7. At a minimum, families are linked to a physician to assure optimal health and development of the baby.
8. Services are provided by staff with limited caseloads to assure that an adequate amount of time is spent with each family.
9. Service providers are selected because of their personal characteristics, skills and willingness to work with culturally diverse communities.
10. All service providers receive basic training in areas such as domestic violence, substance abuse, cultural diversity, family systems, child development, etc.
11. Service providers receive intensive training specific to their role i.e., family assessment or home visitation.
12. Service providers receive ongoing reflective and effective supervision.



THE KIDS COUNT PROGRAM

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KIDS COUNT

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What is the Kids Count Program?

- Kids Count is an early intervention home visiting program based on the Great Kids, Inc./Healthy Families America Model.
- Kids Count is an intensive, family centered and strength based program. The family is the primary focus of services and is the centre around which programming is built.
- Kids Count is funded by the Ministry of Children and Families Development (MCFD) and the Interior Health Authority (IHA) and administered by Kelowna Community Resources.
- Kids Count is staffed by 3 Family Outreach Workers/Home Visitors and a Clinical Supervisor.
- Kids Count Family Outreach Workers work with overburdened families in their homes.
- It is a voluntary, secondary prevention program designed to promote positive parent child interaction, optimal child growth and development and healthy family functioning.
- Kids Count is an advocate for community mobilization and partnerships to prevent families from falling through the cracks.
- Its aim is to work in partnership with community services to offer holistic support based on the strengths and needs of the family.

Service Population

- All participants are parents with their first baby.
- Participants begin the program as early as the first trimester of pregnancy or any time during their infants first three months of life.
- No previous confirmed report with MCFD Protective Services relating to a child.

- Participants reside in the City of Kelowna or West Kelowna.
- Participants are willing to work (**voluntarily**) with a Family Outreach Worker.

What is Different About the Kids Count Program?

- Kids Count is an extension of the Public Health Nursing High Priority Parenting Program.
- Families are considered to be “**At Promise**” rather than at risk.
- The Family Outreach Workers develop long term supportive and trusting relationship with families.

- Kids Count practises the **12 Critical Elements** required to become affiliated and credentialed with Healthy Families America. (**The 12 Critical Elements are listed on the back**)
- It is a strength based model with the motto: “**Do for, do with and cheer on!**”
- It is flexible, creative and uniquely supports each family based on their strengths and needs.
- The Family Outreach Workers visit weekly for 1-1.5 hours to start and families are participants of the program for up to 5 years.

How does a family join the Kids Count Program?

- Referrals are made directly to the Clinical Supervisor for the Kids Count Program.
- Referrals can be made by any community professional or Public Health Nurse. ****Families can also self-refer.**
- The Kids Count Clinical Supervisor reviews all referrals prior to acceptance into the program.
- The Clinical Supervisor arranges a home visit with families to discuss the program and complete an intake assessment.
- Families who meet the program criteria are asked if they would like to be referred to Kids Count and agree to voluntary participation.

What do I do if I am working with a family who could use Kids Count Support?

- Review the Kids Count Eligibility Criteria and Referral Form found at www.kcr.ca.
- Call the Clinical Supervisor to discuss the referral and confirm space in the program.
- The Kids Count Clinical Supervisor reviews the referral to assess eligibility for Kids Count.
- The Clinical Supervisor will contact you regarding the status of the referral.
- Physicians are advised in writing when a family is accepted to and discharged from the program.

FAMILY HOME VISITING A TEAM APPROACH

