



**To:** Maternal Infant Early Childhood Home Visiting (MIECHV) Local Implementing Agencies and Babies First!/CaCoon programs

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**Subject:** Dual Enrollment in Babies First!/CaCoon and MIECHV funded Healthy Families Oregon (HFO) or Early Head Start (EHS)

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Home Visiting outreach efforts should focus on families that are not being served by home visiting programs and dual enrollment in more than one home visiting program should not be done routinely. Avoiding dual enrollment maximizes the availability of limited resources for home visiting services for eligible families. However, for families with multiple service needs, there may be times when dual enrollment in Babies First!/CaCoon and Healthy Families Oregon or Early Head Start is augmenting, not duplicating, services to meet a family's identified needs. MIECHV recipients should not enroll home visiting clients in more than one MIECHV-supported home visiting model concurrently. Babies First!/CaCoon are not MIECHV supported home visiting models.

Examples of the need for dual enrollment include:

- The need for health care coordination services has been identified for a child with special health needs who is enrolled in the Healthy Families Oregon program. The family wants to enroll in CaCoon and continue to receive Healthy Families Oregon services.
- A pregnant person with an identified medical need is already receiving Early Head Start services with their one-year-old. The pregnant person wants to enroll in Babies First! and continue to receive Early Head Start services.

The decision to enroll a family in both programs should be considered on an individual basis considering the family's needs and goals. Home visitors are encouraged to seek support from their supervisor if they are uncertain if a family would benefit from dual enrollment. Supervisors are encouraged to reach out to their OHA MCH Public Health Nurse Consultant(s) and/or MIECHV Program Policy and Systems Coordinator if they have any questions about this dual enrollment guidance.

Home visitors are always expected to be working in collaboration with other service providers so that services are coordinated (and not duplicated) for families. As families' goals and needs change over time, home visitors may transition families with their consent from one program to another.