



Overview of Case Management in Home Visiting

Strategies to Support Case Management in Home Visiting

Research-to-Practice Brief | February 2026

Introduction

The Jackie Walorski Center for Evidence-Based Case Management (Case Management Center) identifies, evaluates, and disseminates evidence-informed case management strategies for the home visiting context. Many home visiting models integrate case management as an important element of their service delivery.

Drawing on a rigorous literature review, internet scan, and engagement with the field, we have developed a series of briefs to support home visiting programs and models as they help families access and connect with essential services.

This resource is designed to help readers make best use of these briefs by:

- Defining case management
- Summarizing components of case management
- Describing the contextual levels that collectively influence each of these components

Future resources will share strategies to support or improve specific case management components in the context of different family priorities, including strategies for connecting families with services such as substance use and mental health treatment, and for improving partnerships and coordination with child welfare agencies.

About Us

Congress created the Case Management Center to support state, territory, tribal, and local home visiting programs as they work to boost the health and well-being outcomes of families served. We share findings from our work through resource sharing, training, technical assistance, and professional development.

Definition

In home visiting, case management is a relationship-based, family-driven, strengths-oriented process, with the overall goal of improving access to needed services and resources in the community. Home visitors partner with families, support them in navigating systems, and act as bridges between families and the community. Case management services depend on each family's evolving priorities and goals. The Case Management Center team partnered with home visiting program staff and families to develop this definition of case management in home visiting.

Case management requires multiple partners and activities operating at different levels of the home visiting system to ensure family access to the services and resources they need. The extent to which families participate in case management will vary by home visiting model, program, provider, family, and goal. As a result, the process may be either straightforward or highly complex, comprising an array of activities, provider types, and follow-ups.

Case management is just one element of home visiting services and most home visiting models include it in their scope of services. Some home visiting models do not distinguish between case management and other activities home visitors regularly perform; these models instead integrate case management into the home visitor's role. Others designate a specific provider whose primary role is case management. Some do not perform case management at all.

Models use varying terms to describe case management. Commonly used terms include service coordination, care coordination, client/patient navigation, cross-sector collaboration, interagency collaboration, and general coordination. We learned in field engagements that the term *case management* can have some negative connotations and may not resonate with all groups, including families. Families do not view themselves as cases to be "managed" or may associate the term with mandatory child welfare services.



Components

There are **six key components** of case management in home visiting. These include the following:

- **Screening and assessment.** Understanding family priorities and needs helps home visitors identify where families could benefit from additional support. For example, home visitors screen for concerns like postpartum depression and child developmental delays and discuss results with the family.
- **Goal planning.** Identifying which services families need helps home visitors and families create plans for connecting with community resources. Goal planning involves working together to determine which services will best address family priorities and setting clear steps for accessing those services.
- **Referrals.** Connecting families to external resources expands the support network available beyond the home visiting program. Programs maintain updated lists of referral partners, and home visitors provide referral information to families. Home visitors may also provide information to the referring service provider and facilitate a warm handoff (that is, introduce the family directly to the new provider).
- **Service navigation.** Home visitors guide families in building the skills needed to navigate systems and access services like early intervention and well-child visits. This may include helping families understand eligibility requirements, complete paperwork, and identify and address logistical barriers to accessing services, such as transportation and childcare.
- **Monitoring and follow-up.** Tracking progress helps ensure that families are moving toward their goals and receiving the services they need. Home visitors check in on whether families are connected with recommended services, regularly assess progress on goals, and adjust support as needed to help families achieve their goals.
- **Community partnerships and coordination.** Building strong relationships with community service providers and establishing clear processes for collaboration can ensure comprehensive care, prevent service gaps, and avoid duplication of efforts. Examples include identifying available resources, maintaining relationships with other providers, establishing collaborative agreements, championing families' needs when

What Is a Strategy?

Strategies are activities and supports to improve case management implementation or outcomes.



coordinating with partners, and reviewing community resources to identify gaps and opportunities.

These six components are built on several foundational aspects of home visiting.

- **Relationship building** establishes the trust necessary for families to share their priorities openly, collaborate in goal planning, and follow through with referrals and services.
- **Emotional support** helps families stay motivated and resilient throughout the case management process, especially when navigating complex systems or facing setbacks in accessing services.
- **Family self-empowerment** means families lead their own journey by making informed decisions about services and developing skills to navigate resources independently and advocate for what they need.

Relevance Across System Levels

Home visitors, home visiting programs, community partners, and broader system factors all play essential roles in creating the conditions that enable meaningful connections between families and services. These factors exist at multiple levels.

Home visitor-family. This level focuses on how home visitors and families work together. It includes foundational components such as screening, goal planning, referral, service navigation, and follow-up, tailored to support each individual family.

Home visiting program. This level includes the local organizations that employ and support home visitors. It encompasses the program policies and procedures, supervision, and structures that ensure home visitors have the resources and guidance needed to coordinate services for families while maintaining program fidelity.

Community. This level includes the local services and resource networks that influence the availability, accessibility, and coordination of services that families need. It encompasses partnerships with related service providers and the community

Strengthening Case Management

When case management is strengthened at each of these levels—from individual home visitor practices to supportive program policies to community partnerships—families can experience improved services and achieve better outcomes.



infrastructure that supports families. The community level also includes community composition and historical context, as these factors can also influence case management.

State, tribal, federal, and model. This level includes the established state, tribal, federal and model policies, regulations, funding structures, and service requirements that govern home visiting and related services.

Conclusion

Case management within home visiting is a complex, multifaceted process that requires shared ownership and collaboration among home visiting programs, local service systems, and leaders operating across various levels of the home visiting system. This shared responsibility recognizes that no single program or provider can address all family priorities in isolation; rather, coordinated efforts from the home visitor-family level through state and federal policy contexts are necessary. While case management practices and supports may vary significantly across different home visiting models and local contexts, the fundamental goal remains consistent: ensuring that families receive comprehensive, coordinated support that promotes positive outcomes for children and families.





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