Home Visitation Work Group Conference Call

3-23-11, 3:00p.m.

Attendees: Daryl Rothman, Cindy Wilkinson, Becky Houf, JoAnne Ralston, Valeri Lane, Sue Stepleton, Stacey Owsley, Pam Thomas, Laura Malzner, Melinda Ohlemiller, Jean Craig

Work Group members who had just participated in the State Steering Committee meeting on the ACA Maternal, Infant and Early Childhood Home Visiting Program, summarized that meeting, and discussed the connection to the CBEC HV work group: The third SIR was received in February, and the application is due between May 9-June 8. The Steering Committee reviewed the Needs-Assessment (Melinda pointed out that non-profits were not included in this survey), as well as the various criteria and measures employed to determine how the counties proposed to be served were identified. There were six programs that qualified/were deemed "evidence-based"—Early Head Start home-based option; Family Check Up; Healthy Families America; Healthy Steps; Home Instruction Program for Preschool Youngsters; Nurse Family Partnership; and Parents as Teachers. Those counties are: Pemiscot, Dunklin, Butler and Ripley in the Bootheel.

Though the national amount of the award seems prodigious, once narrowed down for awardees and once factoring in the number of years, it actually is a more modest and targeted funding opportunity. Either way there are significant needs/gaps that remain, and it is critical our HV work continues in a very intentional way.

This process can help inform the CBEC HV work group as we consider statewide implications in home visitation. Staying connected with this process will be vital.

Matrix: Val added columns for research for links to evidence, and a column for "demonstrated outcomes." There was discussion regarding whether "demonstrated outcomes" or "targeted outcomes" was most appropriate, and it was agreed that the former was the best direction. Sue raised the question of a consistent definition for evidence-based. Becky suggested and the group concurred, gathering from the programs what "evidence" they in fact utilize, and the synthesizing the feedback for an agreed-upon criteria for evidence-based programming that the state would be apt to support/fund.

Cindy W reminded us that it is important to hearken back to the original charge of the work group, and toward that end, it was decided that we would request all programs have their completed matrix information in within two weeks, so we could forge closer to framing a report.

There was a discussion about overlap between the H.V. work group and the P.D. work group, and the importance of remaining mindful of relevant connecting areas. Cindy noted that such overlap definitely exists even in the HV matrix, as there are columns describing training/credentialing requirements related to listed programs. Stacy concurred and added that as the P.D. work has evolved, the focus has broadened to include not just center teaching staff, but home visits as well. At the EC Summit earlier in the month, participants considered what goes into a professional development system for the state—and the importance of discerning these connections was noted. Becky reminded the group as we engage this broader philosophy, to remain mindful of the various state departments and funding and the connections involved therein.

The group then discussed the professional development needs of home visitors, and topics such as substance abuse and domestic violence were noted. Cindy advised that in considering these questions, we would be well-served to simultaneously ask them from the perspective of the needs of the families beings served. As to the larger question of the role of HV programs within the broader scope of EC, Becky articulated that it only makes sense that the HV system manifest within the overall EC/Youth system. Sue concurred, adding that the research definitively cites combination programs—quality center care along with quality home visitation—as the most effective.

- As the group considers next steps relative to moving closer to a report, Stacy suggested clarification of what the report was to include. Cindy said that it was to be a complete scan of HV programs/resources statewide but also a recommendation of a statewide HV system that could be funded/supported. Stacy queried as to the statewide gaps—identifying these indeed seems to be one of the group's responsibilities—it seems more work remains to formalize this identification. There was uncertainty as to the functionality of the programmatic state map that exists on the matrix.
- Cindy Reese was unable to participate in the call but had kindly submitted some substantive information on Strengthening Families and asked the group to consider implications for the HV work. Cindy supported whenever possible including an expectation of addressing the Protective Factors (part of the Strengthening Families Initiative) in RFPs, and being prepared to educate potential providers about this. Sue informed the group that at a recent national conference, the Strengthening Families national staff were very interested in where MO is in the process, and enthusiastically offered their assistance and support—it appeared our state was one of the first to engage the initiate. Stacey reminded the group of the "Promising Practices" aspect of the ACA HV grant, suggestion the possibility of something around Strengthening Families. Becky added that the 25% of the grant would likely manifest as an RFP. Sue informed the group Parents as Teachers has been incorporating the Protective Factors into all of their new curricula. She added

that the newest P.A.T. revision, released in January, is substantially different in its P-3 curricula, more prescriptive for HV training. Almost everything is now online. There are significant changes, and we need to support MO parent educators in getting re-trained.