# Home Visiting Advisory Committee Meeting

February 15, 2023











- Celebrate the opportunity to be in community together.
- Self Care Permission
- Take a few minutes to get settled
- Trio Members kindly rename yourself to include TRIO at the end of your name.









In your zoom breakout room:

- Name
- Organization and Role

#### Introductions

 Find something besides the obvious that all of you have in common. It cannot be your job, physical attribute, we all live or work in Washington, etc.







### Agenda

Time	Activity				
10:00-10:20	Welcome and Introductions				
10:20-11:00	HVSA Data GOAL/OUTCOME: Members will review SFY2023 HVSA performance.				
11:00-11:30	<b>HVSA Expansion &amp; Rates Update</b> <u>GOAL/OUTCOME</u> : Update on plan for expansion and rates. There will be an opportunity for feedback and questions.				
11:30 - 11:11:40	Stretch Break				
11:40-11:50	Subcommittee Recap <u>GOAL/OUTCOME</u> : Subcommittee leads will briefly review their last meetings and preview subcommittee topics for today.				
11:50-12:25	<b>Systems Updates</b> <u>GOAL/OUTCOME</u> : Members will receive updates on legislative, advocacy and policy issues, budget, MIECHV and other items.				
12:25	Closing Remarks/Adjourn Larger Group				
12:30-1:00pm	LUNCH BREAK				
1:00-1:50	Subcommittee Meetings <u>GOAL/OUTCOME:</u> Members will break into the Data & Evaluation and Workforce Development Subcommittees.				
1:50	Closing Remarks/Adjourn in Subcommittees				







# **Follow Up Items**

#### GOAL/OUTCOME: Tie up any lose ends from the last meeting







#### HVAC Goals & Values

- Survey was to emailed to HVAC members after the meeting.
- The survey asked for member to vote on where we wanted to start our reevaluation process.
  - 4 responses- not enough to determine where to start.
  - Launch a poll right now and all members including LIA HVAC members can cast their vote.







#### HVAC 101

- Received several request for an HVAC 101.
- If you are interested, please put you name and email address in the Chat.
  - Schedule a time between now and the next meeting to hold an orientation.







## **HVSA Data**

#### <u>GOAL/OUTCOME</u>: Members will review SFY2023 HVSA performance.







Measuring Home Visiting and Aligned Measures: SFY 2023

### Home Visiting Unit, Department of Health







#### HOME VISITING AT A GLANCE, SFY 2023

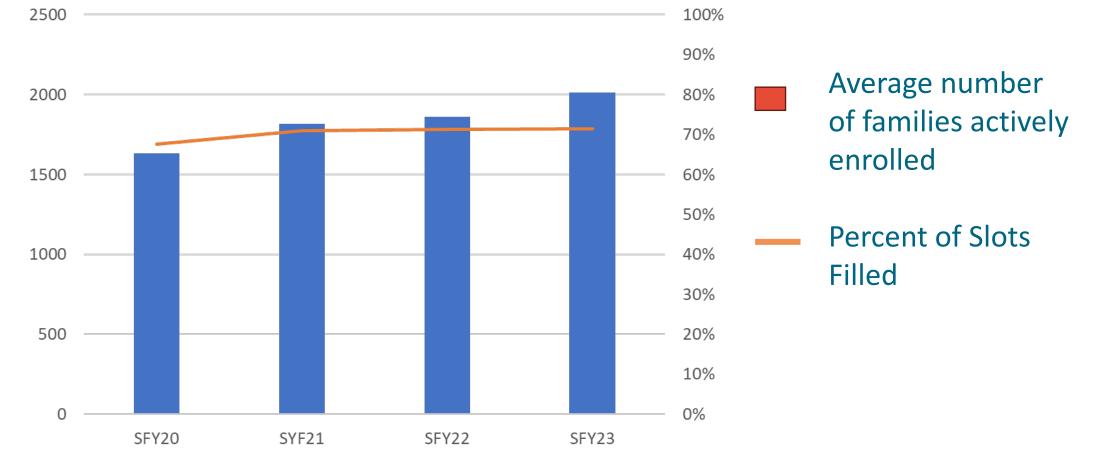








#### Enrollment Performance: SFY20-23, by year

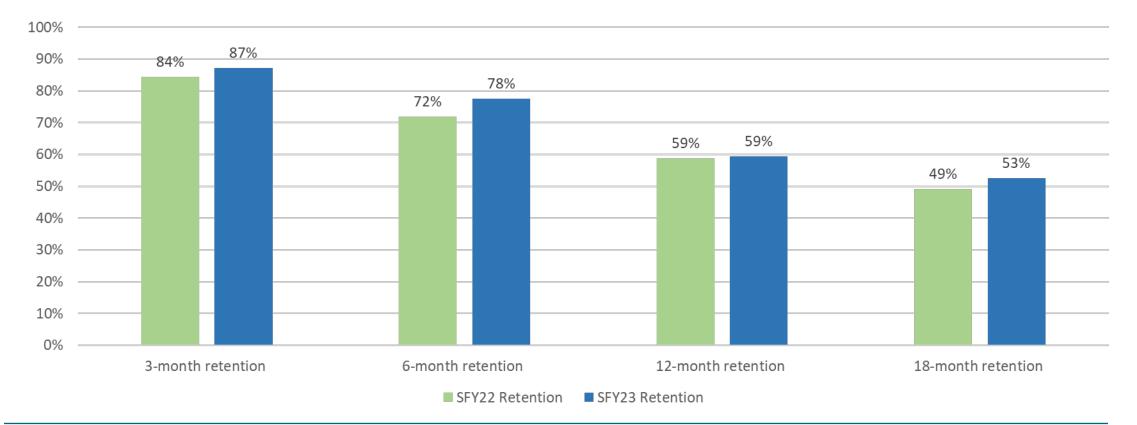








#### Retention milestone among HVSA families, SFY22-SFY23









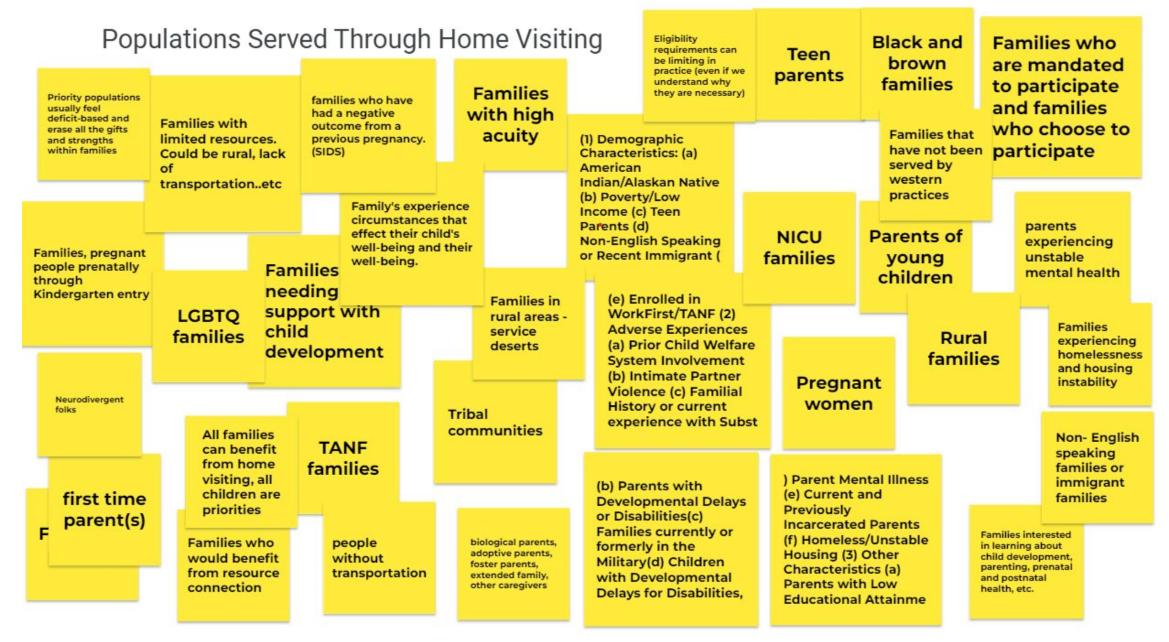
#### **Aligned Measures**







#### What populations are served through home



#### What are the quality-of-life conditions we hope families achieve through home visiting?

physical health & Mental Health	Helping families recognize and lean into their strengths	early brain development	Scho readin	ess.	supporting parents in all the demands of parenting	Confident parents, ie increasing parents confidence.	Safe home environments for families	parents know where to go to meet their needs (upon graducation)
Support for mental wellness	cultural and linguistic reclamation Cultural connections	Born healthy and healthies weight as possible	early lite and lear as play t	ning p e m	inding joy in arenting, ven in the hidst of hallenges	Confident empowered parents	Reduction of harm	Increased community connections
Family Wellbeing	Healing generational trauma	optimal child growth and development Conditions that are	Managing expectation connection someone w been throug you're going through	with /ho's gh what Bi g of	reaking the cycle inter-generational overty	strong parent-child relationship	Prevent child abuse and neglect	Well resourced & integrated in the local community
ability to independence comfort and recognize it and tap into it your network when needed community community of the self-advoct tables and tap into it your network when needed community community community of the self-advoct tables are self-advoct tab	Increase self-confidence, independence, comfort and voice to self-advocate within your network/ community - navigating the system	in alignment with parents' values/what the parents want for their kids	A source of advice/some talk to.		poverty reduction	Secure attachment	Physical and Psychological safety	Connection to community and resources
skills to navigate a society that differs from the one they	Contributing to strengthening community	defined then by the is dif	nselves? What bens when that iferent from t funding ties want?		families' econon well-being & sta same for housin employment, education	tus;	stability	equitable access to community resources

#### Aligned Measures: Purpose

HVSA Aligned Measures: eight performance indicators and systems outcomes that all HVSA programs collect and report on for participating caregivers and children.

Meant to measure impact of home visiting and support accountability to interested parties and funders.







Domain 1: Improved Maternal and Newborn Health

- Continued breastfeeding after age 6 mos
- Routine well-child visits completed on-time
- Depression screening completed for primary caregiver

Domain 2: Reduced Child Injuries, Abuse and Neglect

• Investigated case of child maltreatment initiated

Domain 3: Improved School Readiness and Achievement

- Observed parent child interaction
- Child received daily literacy activities from family member
- Child developmental screenings completed on time

Domain 4: Reduced Crime or DV

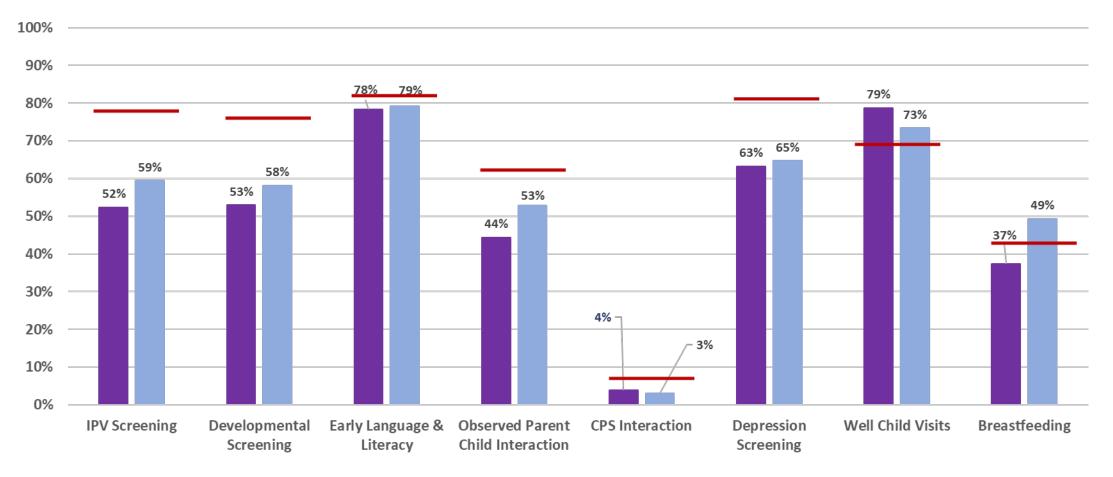
• IPV screenings for primary caregiver







#### Aligned Measures Performance, All HVSA, SFY22-23

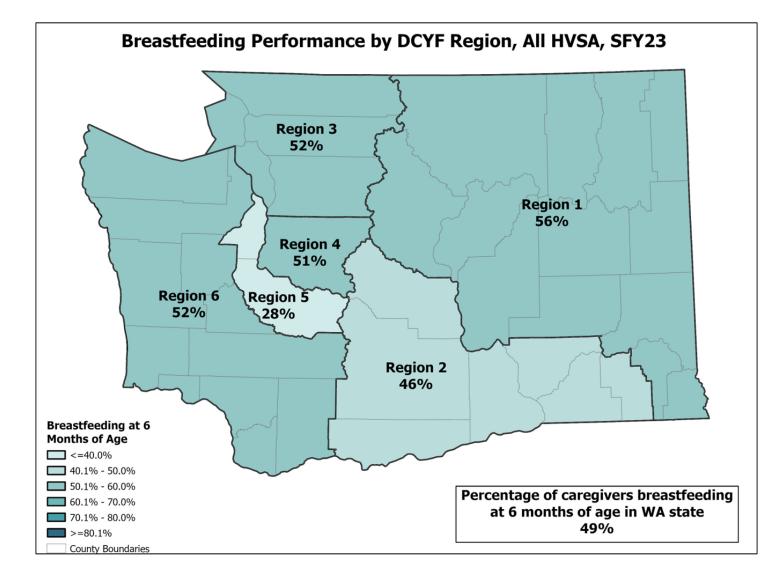


SFY22 SFY23 — MIECHV FFY20-22 National Average

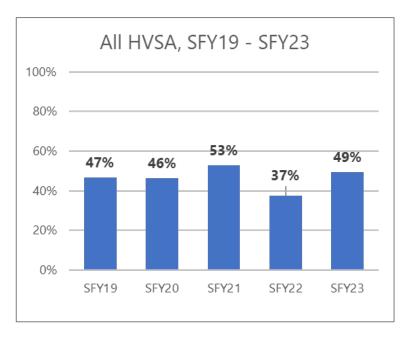








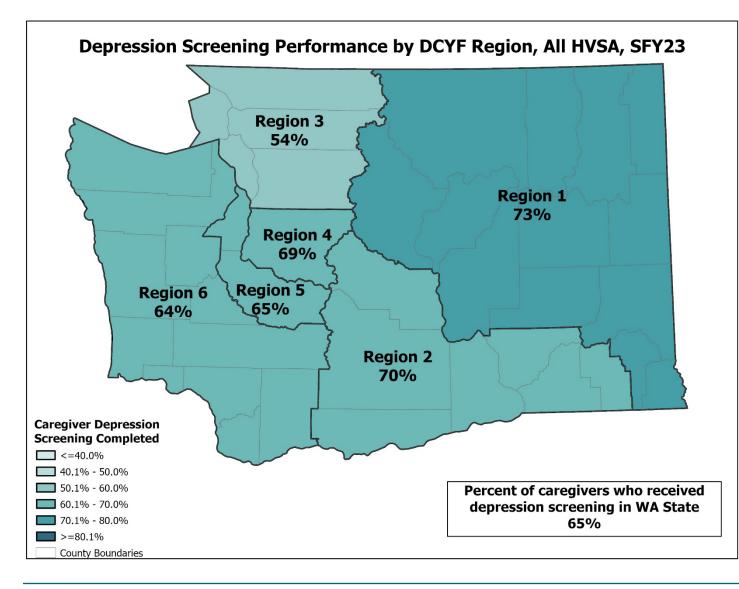
Percent of infants who were breastfed for any amount at 6 months of age.



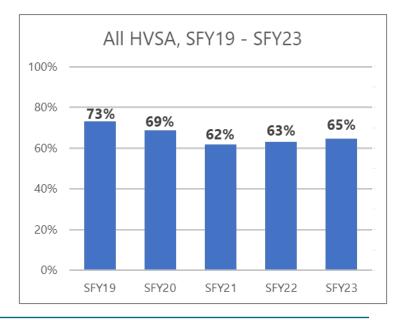








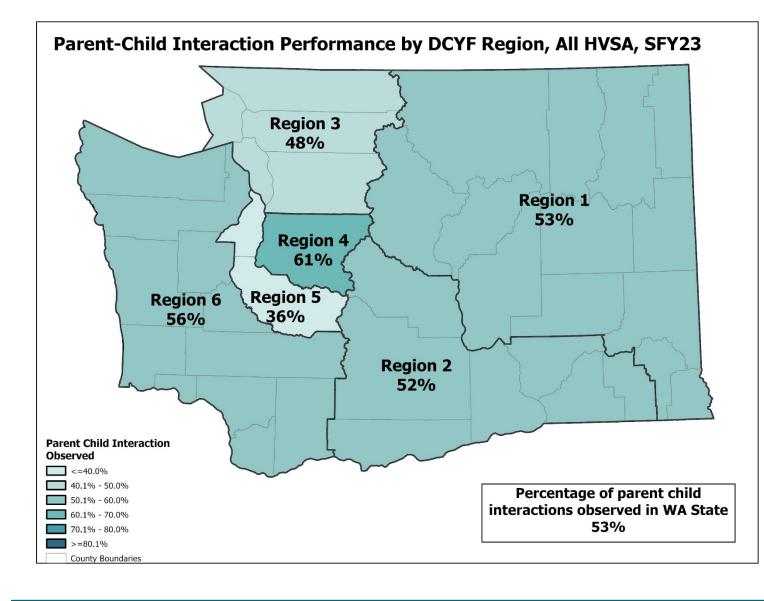
Percent of caregivers who completed depression screening within 3 months of delivery (if enrolled prenatally) or within 3 months of enrollment (if enrolled with a child).



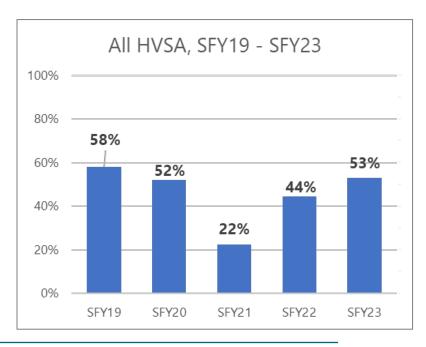








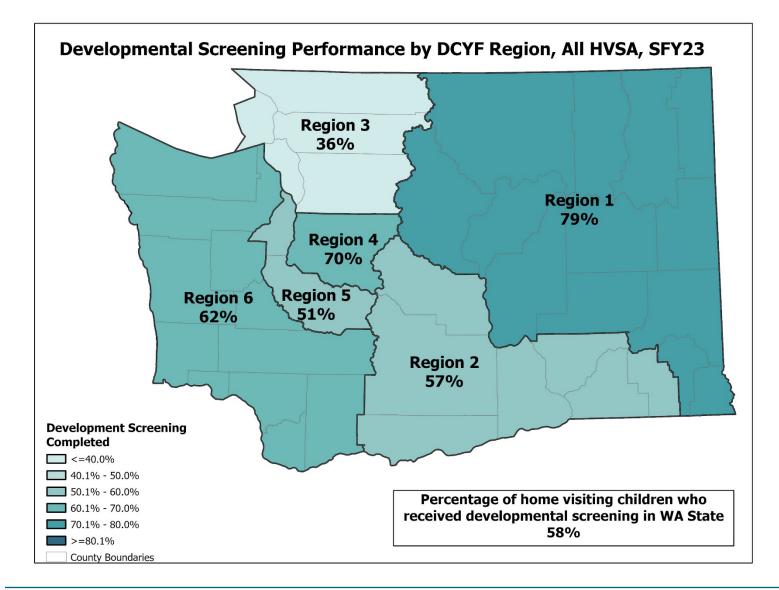
Percent of caregivers who received an observation of caregiver-child interactions by the home visitor.



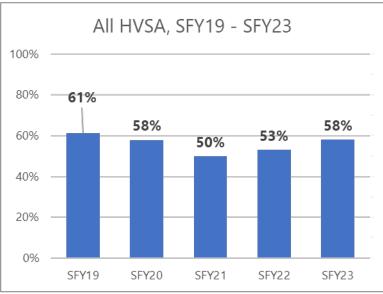








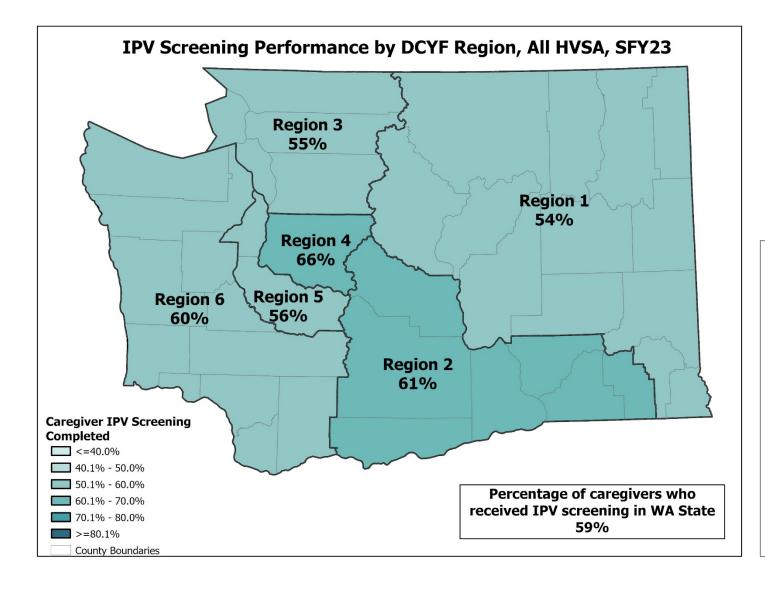
Percent of children with a timely screen for developmental delays for children 9 months to 30 months.



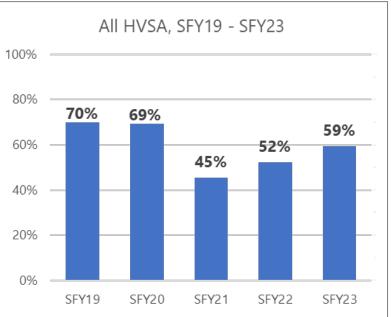








Percent of primary caregivers who are screened for IPV within 6 months of enrollment

















### Demonstration of Improvement

MIECHV legislation requires that awardees program results in improvements in at least 4 out of 6 benchmark areas, for at least one-third of the measures in that area:

Improvement for a measure is defined as meeting one or both of the following criteria:

- Any change in the intended direction for that measure, as compared to state baseline.
- Meeting or exceeding the established national threshold for a measure, while simultaneously not decreasing performance from baseline by more than 10%

We just learned that WA, along with all other MIECHV grantees, have met our FFY2023 Demonstration of Improvement goals!







#### **Questions?**









#### DOH Home Visiting Contacts homevisiting@doh.wa.gov









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Epidemiologist & HVU

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# HVSA Expansion & Rates Update

<u>GOAL/OUTCOME</u>: Update on plan for expansion and rates. There will be an opportunity for feedback and questions.







# **HVSA Rate Setting Update**

<u>GOAL/OUTCOME</u>: Share progress and engage in a discussion







### Getting the rate setting processes right, will:

- Increase workforce stability and retention
- Address the gap between complex services needed and services available
- Align rates paid with cost of doing business, keeping more of our providers in business
- Improve consistency and predictability of services, leading to better outcomes for families

<u>The point:</u> With the help of the provider community, we will improve appropriate service availability through rate setting reform that result in rate increases for service lines across DCYF.







### **Keeping An Equity Mindset**

- How can we ensure that any program or contract changes through this process improve service accessibility and quality? Can this be measured specifically within communities of color and those whose first language is not English?
- Are we ensuring that BIPOC led/owned community agencies are not negatively impacted by the rate process? How will we know?
- Are we ensuring that rural communities and the agencies that serve them are not being disproportionately being impacted by the rates process?







#### Where are we now?

- Working on the base rate for all models
  - PAT, PC+ & NFP are further along in the process
- We have hit a hurdle that we are actively working through & need your input and guidance
  - MIECHV- DCYF learned that it will be a lengthy process to get approval to shift from our current approach to a rates-based payment approach. In addition to lengthy, we do not have assurance that HRSA will approve our rates-based approach.
  - What does this mean? Implementing a rate for our MIECHV funded programs is not possible by July 1. We continue to aim for this date for our State funded programs. While we continue to work on the rate development and rate model, getting closer by the week -we are now grappling with and exploring possibilities with IMPLEMENTATION different payment approaches by funding stream.







#### Where are we now?

- How can you help?
  - We have NOT yet engaged providers as we have been simultaneously working on the rate model and getting feedback from HRSA and their technical assistance providers. With this, we want to have a conversation with you.
  - While we don't have specifics to share today, we'd welcome any initial thoughts you might have.







#### **Spring 2024 Expansion Procurement**

\$1 Million (fewer than 80-100 slots) Contingent on Rate Setting Process

July 1, 2024

**State Funds/General** 

**9 Eligible Models** 







### HVSA Current Array (2024)

46 LIAs 48 programs

9 Models

10 BIPOC-led nonprofits

4 Tribes and 2 Tribal Organizations

27 Non-Profit Orgs

11 County Health Depts 1 State University







**Organization Budgets** 

\$1M to \$169M

median is \$6.6M

#### HVSA Expansions History – last 5

Date	\$ Available	Priority/Eligibility	Awardees		
Spring 2022 Tribal	\$460,000/ \$835,313	Start-Up or Expansion; Eligibility only for Tribes or Tribal Organizations	<ul><li>1 PAT</li><li>2 Family Spirit (1 start-up)</li></ul>		
Spring 2022	\$2.1 M/ \$5,018,782	<ul> <li>Expansion only with Priority Points for:</li> <li>Populations AI/AN, Black/AA, PI, Hispanic, Immigrant and Refugees, Tribes</li> <li>Geography: Remote Rural, 61 top need school locales</li> </ul>	<ul> <li>1 NFP</li> <li>6 PAT (1 tribe)</li> <li>2 PC+</li> <li>1 Outreach Doula</li> <li>1 EHS-HB</li> </ul>		
Fall 2021	\$1 M/ \$2,642,142	Expansion only; Eligibility only to currently funded HVSA programs: Invitation based on performance with enrollment or retention	<ul> <li>3 NFP</li> <li>2 PAT</li> <li>2 PC+</li> </ul>		
Spring 2020 Tribal	\$300,000	Start-Up or Expansion; Eligibility only for Tribes or Tribal Organizations	<i>Only 2 applicants</i> • 1 Family Spirit (start-up)		
Spring 2020	\$500,000/ \$2,301,130	<ul><li>Expansion only with Eligibility for:</li><li>22 Highest need school locales (in HV expansion plan)</li><li>Tribes and tribal organizations</li></ul>	<ul> <li>1 NFP</li> <li>2 PAT</li> <li>1 ESSS</li> </ul>		
Particular Rev Dynamics at HEALTH		Washington State Department of CHILDREN, YOUTH & FAMILIES	START		

# **HVSA Priority Populations**

- Poverty/Low income/Economic Insecurity
- Homeless/Unstable Housing
- Parent Mental Health/Behavioral Health Illness
- Racial and ethnic groups experiencing disproportionality
- Enrolled in WorkFirst/TANF
- Prior Involvement in Child Welfare System
- Intimate Partner Violence

- Non-English Speaking or Recent Immigrant Families
- Current/Previously Incarcerated Parents
- Teen Parents
- History/current Substance Use, including Tobacco
- Parents with Low Education
- Parents and/or Children with Disabilities
- Currently or formerly in the Military







### **Discussion – Options for Parameters**

Installat-	ion Stage	Program Start-Up (new programming)	<b>Program Expansion</b> (new slots to existing programming)		
	odels	<b>Evidence-Based Models-NFP &amp; PAT</b> Nurse Family Partnership Parents as Teachers	Research-Based & Promising Practices Models Early Steps to School Success* Outreach Doula ParentChild+ STEEP (Steps for Effective, Enjoyable Parenting)*		
Tynes of Models		Evidence-Based Models-Other Early Head Start-Home Based* Child Parent Psychotherapy (parent-child) Family Spirit (tribal specific)			
Driority Bacad		Data-Informed: Populations Immigrant Refugees American Indian/Alaska Natives Hispanic populations Black/African populations	<b>Data Informed: School Locales</b> Top 20-40-60 locales <i>based on</i> <i>Risk factors, low- income births, # HV slots</i>		
		Other?			





# **Spring 2024 Expansion Procurement (Reminder)**

\$1 Million (range between 80-113 slots) Contingent on Rate Setting Process

July 1, 2024

**State Funds/General** 

**9 Eligible Models** 







## Purpose of Parameters Determining Priorities for Limited Funds

Possible approaches to using parameters

- Offer priority points to applicants for specific paraments
- Open the procurement only to applicants meeting specific parameters
- No parameters completely open







# **Parameter Option: Installation Stage**

- Set aside portion of funds for Program Start-Up (new programming)
  - Current exploration underway in SW WA with Klickitat and Skamania Counties
- Offer funding only for program expansions (Eligible applicants only existing programs)
  - HVSA Programs?
  - All Programs Implementing one of the 9 models?
- Poll: Set aside funds for start-up program?







# **Parameter Option: HVSA Performance**

Invitation only application for HVSA Programs who meet specific performance criteria?

- Enrollment
- Retention
- Other
- 2 Polls: Offer funds only for HVSA programs based on performance? What metric(s)?







## Parameter Option: Model Array (Current in HVSA)

Model	# Programs	# Families	\$ Invested
Evidence Based - PAT & NFP	39	2,660	\$17,079,444.16
Nurse-Family Partnership	12	1,252	\$8,896,814.38
Parents as Teachers	22	1,408	\$8,182,629.78
Evidence Based - Other	3	99	\$909,169.16
Child Parent Psychotherapy – parent-child dy	vad 1	7	\$54,548.00
Early Head Start – Home Based*	2	37	\$423,640.67
Family Spirit	3	45	\$430,980.49
<b>Research Based and Promising Practices</b>	6	338	\$2,525,241.15
Community Based Outreach Doula	1	104	\$832,358.00
Early Steps to School Success*	1	20	\$122,900.00
ParentChild+	4	188	\$1,374,183.15
STEEP*	1	26	\$195,800.00
	ashington State Department ( HILDREN, YOUTH & FAMILI		START

## **Parameter Option: Model Array**

Set aside a percentage of awardees for

- Programs implementing 7 models <u>other than</u> NFP and PAT? OR
- Programs implementing 4 non-EBP models

Evidence-Based - NFP & PAT
Nurse Family Partnership
Parents as Teachers

Evidence-Based Models-Other Early Head Start-Home Based\* Child Parent Psychotherapy (parentchild) Family Spirit (tribal specific) Research-Based & Promising Practices Models Early Steps to School Success\* Outreach Doula ParentChild+ STEEP (Steps for Effective, Enjoyable Parenting)\*

\$1 Million – as of July 1, 24 (Expect 80-113 slots) Contingent on Rate Setting State Funds/General 9 Eligible Models

### Poll: Set aside portion of funds for specific model groups?







# **Parameter Option: Serving Specific Populations**

Prioritize programs proposing to serve populations experiencing disproportionality with child welfare involvement\* or include those elevated in recent needs assessment

- American Indian/Alaska Natives\*
- Black/African\*
- Hispanic
- Immigrant Refugees

#### Poll: Prioritize top 2 or all 4 populations?







## Parameter Option: Serving Specific Geographic Areas (School Locales)

- Prioritize programs proposing to serve geographic areas:
  - Locales with higher rates of child welfare involvement
  - Locales with higher "risk factors" and fewer home visiting slots
  - Locales with medium "risk factors" and fewer home visiting slots

*Poll: Prioritize geographic areas?* 







# **Defining Priority = Eligible to Apply or Extra Points**

A) To be eligible to apply, programs must propose to serve the specific populations/areas identified in the application

• Limits applications to smaller, focused programs

### OR

B) Applicants are not required to but gain priority points for proposing to serve the specific populations/areas identified in the application

- Wider pool of applicants;
- Additional points don't assure funding (e.g. well written applications without priority points can still prevail)

Poll: Eligibility or priority points for specific populations?







## **Options: Other Parameters?**

Please share your ideas!







# **Priority Parameters – Most Important?**

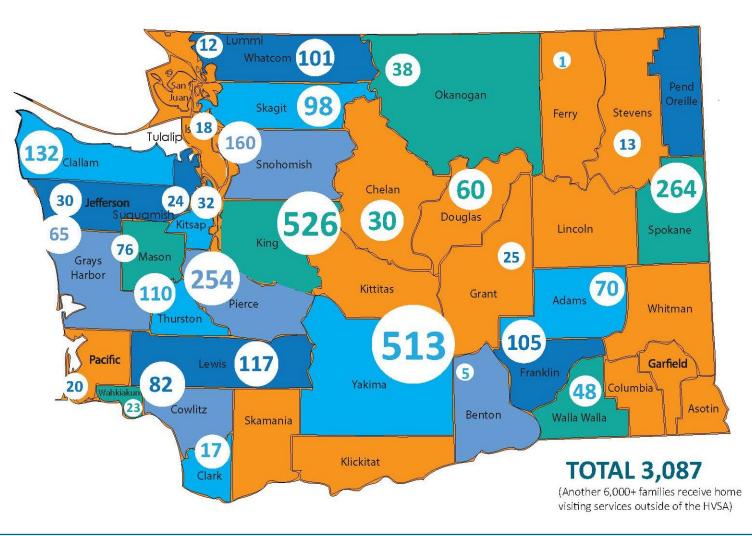
- Installation or Expansion
- HVSA Performance
- Set Asides to Expand Model Array
- High Priority Populations
- High Priority Geographic Locales
- Poll: Top 3 parameters?







### **HVSA Current Array**











### 10-minute Snack & Stretch Break

# Subcommittee Recap & Preview

<u>GOAL/OUTCOME</u>: Subcommittee leads will briefly review their last meetings and preview subcommittee topics for today.







### Workforce & Professional Development Subcommittee

Nina Evers







# **HVAC Update on Training Survey**

### December

 Butler Presentation to HVAC and Subcommittee Conversation about Parameters of Study

January

- Butler Develops Key Constructs Feedback Form
- WF Subcommittee Meets w/Butler to Review Key Constructs

February

- HVAC and TRIO members sent survey to help prioritize study content
- Butler to conduct interviews with 4-5 LIA teams







### **Today's Workforce Subcommittee Agenda**

- 1. HV Training Survey
  - Butler next steps
  - Discussion
    - Trainer Engagement
    - How are we defining cultural match?
- 2. Participant Parameters
  - Shared Meaning of Home Visiting
  - Who does this definition include?
- 3. Subcommittee Next Steps
  - Membership
  - HVAC Workforce Recommendations

Notetaking: Emily Morgan







## **Data & Evaluation Subcommittee**









## **True Cost Subcommittee**

Adrian Lopez & Laura Alfani







# Systems Update

<u>GOAL/OUTCOME</u>: Members will receive updates on legislative, advocacy and policy issues, budget, MIECHV and other items.







## LEGISLATIVE UPDATE

Erica Hallock & Stephanie Budrus







## Advocacy & Policy Resource

For more information, highlights from legislative weeks, active bills, details on policy committee meetings, trivia and much more visit:

### **Start Early Washington-Notes from Olympia**







# Early Learning Updates

#### **ELAC Update- Samantha Masters**







# **MIECHV** Update

- FFY2023 Demonstration of Improvement goals- Met!
- Great AGM in January
  - Still working on reauthorization impact but we are seeing things slowly roll out.
  - Interest in engaging grantees in change implementations.
- 15% admin burden reduction workgroup







#### **Data and Evaluation**

Martha Skiles-Co-lead

Gretchen Thaller-Co-lead

Adrian Lopez Romero

Erica Hallock

Jake Deskins

Janey van den Broek

Kasondra Kugler

Laura Alfani

Laurie Lippold

Marilyn VanOostrum

Rene Toolson

Samantha Masters

Soraya Ayoubi-notetaker

Trissa Schiffner

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Bridget Lecheile
Caroline Sedano
Cassie Morley
Cynthia Turrietta
Elisia Anderson
Emily Morgan-note taker
Emily Ponick
zumi Chihara
Katie Hess
Kristi Jewell
eanne Crippen
eigh Hofheimer
iv Woodstrom
Marcy Miller
Monica Oxford