

Home Visiting Advisory Committee

Virtual Meeting

February 11th, 2021

Attendance

- Adrian Lopez
- Catherine Blair
- Courtney Jiles
- Ellen Silverman
- Erica Hallock
- Gretchen Thaller
- Izumi Chihara
- Jennifer Hooper
- Katie Eilers
- Kristi Armstrong
- Laura Alfani
- Liv Woodstrom
- Marilyn VanOostrum
- Martha Skiles
- Melanie Maltry
- Melissa Kenney
- Nina Evers
- Nita Lynn
- Rene Toolson
- Samantha Masters

Subcommittee Report Outs

Workforce Development

- Overview of subcommittee role
- Reviewed survey feedback, talked about burn out and wondering about the link to retention
- Discussed cultural humility and trauma informed services tying into equity overall
- Will continue to engage with the field on recruitment capacity

Data and Evaluation

- Evaluation of First Steps (MSS): <https://www.dshs.wa.gov/node/33013/>
 - Study found that receipt of MSS services resulted in improved health behavior and outcomes (e.g. prenatal care, preterm births, smoking cessation, breastfeeding)
 - MSS is also reaching diverse families
 - Study used state administrative data, which has pros and cons
 - Ellen is hoping for more data about outcomes in the fourth trimester
 - Implementing MSS can be challenging for programs due to the business model
 - Also vulnerable to state cuts
- We then talked a little bit about the challenges of implementation with MSS based on the funding structure and the challenges for a lot of programs
- Additional MSS reports:
 - <https://www.hca.wa.gov/assets/program/mss-prenatal-postnatal-ach.pdf>
 - https://www.hca.wa.gov/assets/program/mss_icm_age_race_status.pdf
- Reviewed HVSA data collection on race and ethnicity
 - Based in federal definitions
 - Different model databases have different structures for collecting this data
 - DOH also has policies against reporting small numbers

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- More to think about with how we capture individual experiences while also aggregate meaningfully at the state level

Policy Updates

- March 17th will be updates for the budget
- Our states budget forecast has been shifting a lot, interestingly the revenues haven't been as poor as originally thought and we are not projecting the level of budget drops we originally thought
- Unlikely we will see cuts to reduce services and hoping to see expansion
- In terms of legislation, we are tracking the Fair Start Act both in the House and Senate
- The bill will serve to set up a framework for a more expansive and robust service field should additional dollars be available
- The bill does not provide additional revenue, but there is a potential source that would add funds into the account - they had a recent hearing today on this
- These are end of session bills that will be under review in the next 72 days and will have outcomes right at the end of legislation
- COVID Impact on Home Visiting - includes the data referenced by Erica can be found here; https://www.dcyf.wa.gov/sites/default/files/pubs/FS_0055.pdf

Core Competencies

- We'll be putting together and aggregating resources that already exist for this body of work.
- We are balancing how much to engage while also keeping experts and providers in the field front and center.
- If you have any resources or know of anyone that would be great to hear from, we would appreciate sending them our way as well.
- These competencies be on a continuum, scaling where home visiting staff are in learning, Acknowledgement that relationship-based work is developmental, prioritizing lived experience
- It's important to create opportunities like this for the field to participate and specially to Home Visitors who need to see themselves in the work being developed for them and based on their services to families
- Do we have plans to engage clients of home visiting in the development of competencies?
- BSK worked with WA-AIMH to create IECMH competency crosswalk with HV model training for PAT, ParentChild+, CBOD.
- These HV competencies need to be specific to our field, not the same from so many other core competencies that other bodies of work already have but really created for and with input from Home Visitors

Discussion Questions

1. What do you think are the benefits in confirming core competencies?
2. What advice do you have as we embark on this work?
3. What would a successful process and implementation of competencies look like from your perspective?

Systems Updates

- PDG Updates: Needs Assessment was approved by HHS and will be posted to the DCYF website soon
- Guidance on Returning to In-Home Services
 - We have to be careful about how we talk about it and the language that is used because we can't ask if home visitors have been vaccinated or not, it's still private information
 - There is confusion going around about the liability that home visitors have or do not have when considering they are not health care providers
 - Guidance didn't speak to liability because of the need to keep that in the hand of organizations and their own decisions, legal counsel, and policies. Guidance did recommend sharing with families for the understanding of consent in moving forward.

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Resources Shared:

- [NHVRC: Five Ways to Strengthen the Home Visiting Workforce Using Core Competencies](#)
- [Draft Early Learning Coordination Plan Goals and Strategies](#)
- [DOH Phase Infographic](#)
- [DOH Vaccine News Updates](#)
- [DOH COVID-19 Data Dashboard](#)
- [Evaluation of the Health Care Authority's First Steps Maternity Support Services Program in Washington State](#)
- [Start Early Washington Newsletter– Notes from Olympia](#)
- [COVID-19 Impact on Home Visiting](#)

Next Meeting

Thursday, May 27th (10am – 2pm)