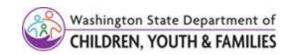
Home Visiting Advisory Committee Orientation Manual

Table of Contents

Home Visiting Advisory Committee (HVAC) Overview	2
HVAC Membership	3
Membership Review	4
Home Visiting Advisory Committee (HVAC) Chair	6
Overview of Start Early WA and DCYF	7
Washington State Home Visiting Goals and Objectives	9
Introduction to Home Visiting:	13
Educational Resources and Links	16
Home Visiting Model Websites:	16
Home Visiting Advisory Committee Conflict of Interest Policy	20
Home Visiting Advisory Committee Confidentiality Agreement	22





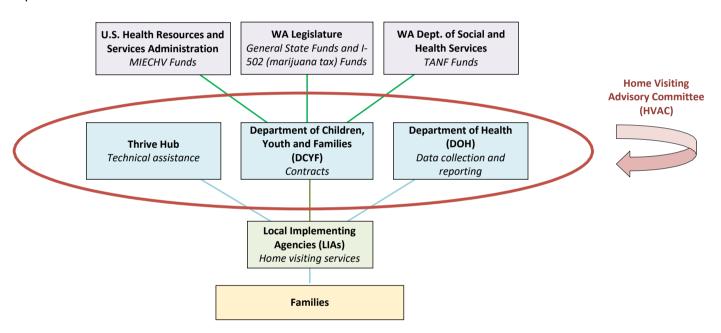
Home Visiting Advisory Committee (HVAC) Overview

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Purpose of the HVAC

The Home Visiting Advisory Committee (HVAC) is in <u>statute</u> with the purpose to advise the "Home Visiting Services Account (HVSA) partnership regarding research and the distribution of funds from the account to eligible programs." The committee provides oversight and strategic direction to Washington State's home visiting systems building and expansion of services.



Goals

The goals of the committee are:

- Ensure access to home visiting services for families that could benefit most in Washington State.
- Establish a consistent and effective process to gather feedback from stakeholders regarding home visiting and advise leadership regarding home visiting direction.
- ❖ Utilize data to understand community need and disperse funding to communities that could benefit most.
- Support home visiting services in being integrated and accessible in communities so that families can access services that fit their needs.

As mentioned above, the HVAC advises in the distribution of HVSA funding investments which are informed by a number of values developed through the collaborative work of Washington's many home visiting stakeholders, including the HVAC. The HVAC ensures that investments are meeting the values, which include:

- **1. A Portfolio Approach:** The HVSA is invested in using a portfolio approach to fund a range of models and programs, supporting home visiting that will meet the needs of diverse communities and populations.
- **2. Diverse Representation:** The HVSA is invested in ensuring the portfolio of funded programs includes representation from diverse geographic, racial, and cultural communities.

- **3. Funding a Range of Capacity:** The HVSA is invested in granting funds to programs and organizations with a broad range of capacity, including high-capacity, moderate-capacity, and low-capacity programs.
- **4. Grantee Participation:** The HVSA fosters participatory engagement with grantees across technical assistance and evaluation processes.

Role of Advisory Committee

- Integrate expertise of home visiting models, early learning research and knowledge, and the experience of families and providers to inform how the state supports and expands home visiting services that meet the values and goals of the Home Visiting Advisory Committee.
- Develop strategies and recommendations on how home visiting can be more integrated and accessible with other community resources.
- Review, discuss and deliberate to shape recommendations on key questions and findings based on data and research.

There are four subgroups within the HVAC which focus on:

- 1) service integration;
- 2) workforce development;
- 3) data and evaluation;
- 4) bringing forth family voice and leadership.

HVAC Membership

The HVAC is comprised of 20-25 home visiting experts, government and health department representatives, tribal community liaisons, service providers, research and evaluation experts, and volunteers from the community who reflect Washington state's diversity. The HVAC also consists of 6-8 representatives from home visiting programs to ensure that program voice and perspective is incorporated into HVAC decisions. Expertise in home visiting models is incorporated through connections with Washington state model leads for Nurse-Family Partnership, Parents as Teachers, and Parent-Child Home Program.

Members are identified and recruited based on the following characteristics:

- Passionate and dedicated volunteers from the community who represent the diversity of Washington State and whose expertise and perspective can contribute to the goals of the HVAC.
- General knowledge of home visiting.
- Committed to diversity, racial equity and inclusion.
- * Knowledge on the early learning system or family support services in Washington state.
- Willing to learn about community issues, analyze synthesized data, and identify solutions at a system-wide level.

HVAC Membership Profile						
Home Visiting	Policy/State	Higher	Allied	Data,	Advocates	
Programs	Systems	Education	Professionals	Research and		= 18-26
				Evaluation		members
6-8	4-6	2-3	2-3	2-3	2-3	

Membership Commitment

Ability to participate in quarterly meetings. Committee meetings will be held once every quarter with the expectation that members attend at least three meetings per fiscal year. Members may need to devote time to reviewing documents and notes in preparation for scheduled meetings. Occasionally, special meetings will be scheduled in response to matters that are time sensitive and or need additional attention. There are opportunities for those that are willing to participate in subgroups within the HVAC and take on leadership positions as desired.

Roles and Responsibilities

- A. Have an understanding of the home visiting landscape
- B. Purpose agenda topics to discussion in committee meetings when topics of interest arise.

- C. Provide feedback in order to ensure that final decisions are compatible with state-level policy including applicability, practicality, and sustainability
- D. Attend regularly scheduled committee meetings and special meetings
- E. For those that are willing, regularly participate in a subcommittee

Conflict of Interest and Confidentiality

All HVAC members are required to submit a Conflict of Interest Disclosure Form. A conflict of interest does not disqualify the member from HVAC membership, but organizations in a position to benefit from HVAC funding decisions are not permitted to vote on funding parameters. Members are also required to sign a Confidentiality Agreement.

Resignation

A member may resign at any time by submitting a written notice of resignation

Membership Closure

Membership may be closed upon insufficient participation and active involvement in regular committee meetings. Upon a membership review, members experiencing low attendance and participation will be asked to reconsider their membership commitments as well as the opportunity to work on further solutions.

Good Standing Members must have updated Confidentiality Agreements and Conflict of Interest forms as well as attend at least three meetings per fiscal year to be considered in good standing.

Attendance

HVAC general meetings are held once per quarter with additional special meetings scheduled out as needed. There are at least two in-person meetings per fiscal year as well as two virtual meetings. Members are asked to attend a total of three meetings per fiscal year. Both general and special meetings may count towards these participation requirements.

Membership Review

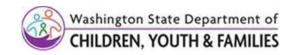
Memberships are reviewed once a year to ensure attendance and participation of members is adequately being met to provide active involvement in the body of work designated to the committee.

The review consists of three parts:

- Filling out a survey to provide reflection on participation in the HVAC as well as feedback on the work and progress accomplished by the HVAC to help strengthen the structure and involvement of members.
- A review of attendance will be made to ensure members are in good standing with the level of participation asked of them.
- Update both Confidentiality Agreements and Conflict of Interest forms to remain in good standing.

If you are interested in serving as a member of the HVAC, please contact Anna Contreras at rcontreras@startearly.org.





Home Visiting Advisory Committee (HVAC) Chair HVAC Chair Description

The HVAC Chair ensures that the management committee functions properly by being a representative of the HVAC that helps in structuring meetings to be the most beneficial for both the management committee and HVAC members. As the HVAC Chair they will focus on creating opportunities for and leading integration of member voice in decision making. The Chairperson shall be appointed by the HVAC Members through a (simple majority) voting process.

Roles and Responsibilities

- A. Attend regularly scheduled committee meetings and special meetings
- B. Participate in regular meetings with DCYF and Start Early WA to determine agenda topics and meeting facilitation structures
- C. Have an understanding of the topics and issues to be presented prior to the committee meeting
- D. Co-facilitate discussions of topics and issues along with DCYF and Start Early WA staff.
- E. Shall facilitate further discussion when a consensus or other voting process is unable to finalize avoting decision.
- F. Provide feedback in order to ensure that final decisions regarding state-level policy is reflective of feedbackfrom the HVAC
- G. Regularly attend the meetings of at least one sub-committee and report back on sub-committee activities
- H. Serve as the HVAC's representative to Early Learning Advisory Council (6 meetings per year)

Term limits

Membership reviews for all HVAC members will be held once every fiscal year. The HVAC Chair will participate in this review with added opportunity to provide specific feedback about the chair role.

Resignation

A member may resign at any time by submitting a written notice of resignation

Membership Closure

Members will be asked to reconsider their membership upon insufficient participation or active involvement in committee meetings. Members must have updated Confidentially Agreements and Conflict of Interest forms and attend at least three meetings per year, in which one is in-person, to be considered in good standing.



Overview of Start Early WA and DCYF

Start Early Washington

Vision- High-quality early learning opportunities from birth that prepare children for success in school and in life are an integral part of our nation's education system.

Mission- Start Early gives children in poverty the best chance for success in school and in life by advocating for and providing the highest quality care and education from birth to age 5.

Core Values

Excellence: We pursue excellence and the highest level of performance in all of our work. **Learning:** As a learning organization, we embrace the principles of continuous improvement, creativity and innovation. We recognize risk taking, success and failure are all part of the learning process. **Communication:** We encourage the free flow of information between people, divisions and teams. We value individual expertise, experience and knowledge as integral to advancing our work. **Empowerment:** We provide expertise for everyone to lead and contribute to the organization's

Empowerment: We provide opportunities for everyone to lead and contribute to the organization's success.

Diversity: We welcome diverse ideas, experiences, cultures and world views to enrich the work and foster a healthy and productive work environment.

Appreciation and Respect: We value, appreciate and acknowledge contributions to our work at all levels. We respect work/life balance and family time.

2018-2023 Strategic Goals

- 1. Positioning and Value: We transform the early childhood field's ability to deliver quality at scale by generating knowledge, deploying solutions and expertise, maturing systems, and navigating the field toward a cohesive vision.
- 2. Impact and Sustainability: We demonstrate our impact on children and families and builda broad and sustainable base of support for the Start Early and our mission.
- 3. People and Process: We are an effective organization that attracts, develops, and retains talented individuals who are leaders, facilitators, and connectors of people, ideas, and resources.
- 4. Technology and Architecture: We have the technological infrastructure and capabilities to support exceptional execution.

Overview of Start Early WA and DCYF



DCYF

(Department of Children, Youth, and Families)

Vision- All Washington's children and youth grow up safe and healthy—thriving physically, emotionally, and educationally, nurtured by family and community.

Mission- Protect children and strengthen families so they flourish.

Values

Inclusion - Voice, place, representative. Inform decisions and understand impact

Respect - Dignity, acknowledging differences, valuing people, "I see you, I hear you, I value you"

Integrity - Stand by what you say, say it do it, here for the right reason

Compassion - Caring, heart in it, without judgment, humanity

Transparency - Truth telling

Who We Are

DCYF is a cabinet-level agency focused on the well-being of children. Our vision is to ensure that "Washington State's children and youth grow up safe and healthy—thriving physically, emotionally and academically, nurtured by family and community."

What We Do

DCYF is the lead agency for state-funded services that support children and families to build resilience and health, and to improve educational outcomes. We accomplish this by partnering with state and local agencies, tribes and other organizations in communities across the state of Washington. Our focus is to support children and families at their most vulnerable points, giving them the tools they need to succeed.

Brain science tells us that laying a strong foundation, early in life, critically impacts healthy development. The science also tells us that addressing trauma, especially at critical transition points in the lives of youth, helps ensure successful transition into adulthood. To truly give all children the great start in school and life they deserve, DCYF was created to be a comprehensive agency exclusively dedicated to the social, emotional and physical well-being of children, youth and families — an agency that prioritizes early learning, prevention and early intervention at critical points along the age continuum from birth through adolescence.

Washington State Home Visiting Goals and Objectives

Excerpted from the Washington State Home Visiting Updated State Plan, June 2011

The State Plan for a Home Visiting Program provides **high-level goals** and a set of clearly prioritized, feasible and **actionable objectives** that are necessary to foster a home visiting system in Washington. These priorities were identified through a collaborative process that involved stakeholders who are the most knowledgeable about the needs of at-risk populations and communities in our state. These goals and objectives are the critical next steps our system must take to continue building a comprehensive home visiting system, as well as contribute to the development of Washington's comprehensive early learning system.

The goals and objectives for Washington's State Plan for a Home Visiting Program fall within five strategic "buckets": Governance and Planning; Finance and Sustainability; Service Delivery and Access; Quality and Accountability; and Public Engagement.



Figure 4: The Five Strategic "Buckets" for the Goals of the State Home Visiting Program.

1. GOVERNANCE AND PLANNING

Washington is in the process of developing a collaborative governance structure over the next two to three years, as outlined in the state Early Learning Plan. A federal grant for continued development of the Early Learning Advisory Council (ELAC) will be used to build a long-term, integrated governance and planning structure at both the state and local levels. Over the long-term, home visiting will be integrated into the broad early learning governance structure.

Goal 1: Integrate the home visiting system as part of the broader early learning planning and governance structure, encourage collaboration at the state and local levels, and engage and reflect the communities served.

Objectives:

A. Use the current home visiting planning structure to provide ongoing input and strategic direction in the development of the home visiting system. This structure includes ELAC, the Home Visiting Advisory

Committee, the Home Visiting Partnership Group, and the Home Visiting Executive Team (formerly the Cross Agency Governance Structure or CAGS).

- B. Encourage strong local planning structures.
- C. Link with partners in health, human services and K-12 to plan for a comprehensive approach to home visiting and linkages to other services and supports for families.
- D. Listen to diverse local communities' views about culturally competent home visiting services, and use their input and local programs' expertise to assess the cultural competency of promising, research-based and evidence based home visiting models.
- E. Ensure that home visiting work is informed and influenced by families, consumers and stakeholders, and aims to reflect the diversity of communities served at the local, regional and state levels.

2. FINANCE AND SUSTAINABILITY

To enhance and expand home visiting benefits prenatal through age 5 requires alignment of current funding and development of new funding resources. Many young children in Washington are living in families that are low-income or living in poverty, as described in our ELP. Funding for home visiting services is not commensurate with the demonstrated need. The 2010 Legislature created a Home Visiting Services Account (HVSA) to align and leverage public funding with matching private funding to increase the number of children and families being served by home visiting.

Goal 2: Build finance strategies and generate resources to sustain and grow the home visiting system in Washington state.

Objectives:

- A. Seek funding from current sources, and new public (including local government) and private sources. Explore opportunities for leverage and to braid and blend funding sources through the HVSA.
- B. Build finance strategies to support evidence-based, research-based and promising practice home visiting programs.
- C. Secure resources to fund home visiting services and the infrastructure to support quality in local programs and at the state level.
- D. Develop strategies to build long-term sustainability of high-quality home visiting programs.
- E. Ensure that the finance strategies are informed and influenced by families, consumers and stakeholders, and aim to reflect the diversity of communities served at the local, regional and state levels.

3. SERVICE DELIVERY AND ACCESS

The Washington State Home Visiting Needs Assessment identified 32 geographic areas and five racial/ethnic groups as being at-risk compared to the state. The needs assessment found that four evidence-based and nine other home visiting programs are in use in the state, but only an estimated 2 to 11 percent of at-risk children and families are receiving these services. Through the U.S. Census and Washington Kids Count, there is ample evidence that to develop an early learning system that meets the

needs of all children requires explicit attention to a number of current gaps that exist—by income, race/ethnicity, language, and culture—both in child outcomes and opportunities and system capacity and response. Washington continues to build off a strong foundation of work that has been done at the state and local level to provide high-quality home visiting programs and models to support families with young children get a good start in life.

Goal 3: Ensure that high-quality, culturally competent home visiting services that meet the needs of local communities are available and accessible to at-risk families across the state.

Objectives:

- A. Make evidence-based, research-based and promising program models more widely available and accessible to local communities.
- B. Build capacity to increase access to home visiting services in rural, tribal and other underserved communities.
- C. Identify and support effective intake and referral processes at the community, regional and state levels with organizations/entities that work closely with families.
- D. Conduct culturally competent outreach to recruit and retain families in home visiting programs in underserved communities.
- E. Work with communities and developers/representatives of evidence-based, research-based and promising home visiting models to ensure the cultural competency of home visiting services.

4. QUALITY AND ACCOUNTABILITY

Funders and policymakers want their investments to improve children's outcomes and overall readiness for school. This calls for programs to be accountable. In Washington, we are responding to accountability in diverse ways as outlined in our Early Learning Plan. For home visiting there is an emphasis on continuous quality improvement of the home visiting programs. Efforts also are under way in Washington to evaluate evidence-based home visiting programs in terms of the outcomes for healthy parenting and child development, early literacy and children's school readiness.

Goal 4: Ensure high-quality services and effective implementation of home visiting models and programs.

Objectives:

A. Increase the capacity to collect and analyze meaningful data at the program, model and systems levels for use in home visiting program improvement efforts.

- B. Support communities in using these data for continuous quality improvement and on-going learning in their organizations.
- C. Support communities in ongoing evaluation of promising/innovative practices to develop stronger evidence of effectiveness.

- D. Ensure that the processes for assuring the quality of home visiting are informed and influenced by families, consumers and stakeholders, and aim to reflect the diversity of communities served at the local, regional and state levels.
- E. Build professional development opportunities, training, and technical assistance for specific models/programs to support quality implementation of home visiting services.
- F. Identify opportunities to share information and collaborate across home visiting programs and with partners in health, education and human service systems.
- G. Build an integrated accountability system that meets local, state and federal needs, is consistent with program models and is cost-effective.

5. PUBLIC ENGAGEMENT

Nationally and in Washington, interest has been growing in using home visiting to enhance parenting, and promote the optimal growth and development of young children. Research has shown the effectiveness of home visiting to buffer the effects of multiple risk factors and benefit children's health and development. Organizations and agencies supporting children and families are engaging the public in support of home visiting and building a coordinated early learning system.

Goal 5: Build community and public will for a home visiting system that provides high-quality services to families in local communities.

Objectives:

- A. Educate the public about home visiting services and provide information about home visiting services offered in Washington.
- B. Cultivate champions to support local home visiting services and programs, and provide information about ways to get involved.
- C. Build off of existing public awareness campaigns that focus on early childhood health, development and learning, in order to inform parents, families and communities about home visiting.
- D. Ensure that public engagement efforts are informed and influenced by families, consumers and stakeholders, and aim to reflect the diversity of communities served at the local, regional and state levels.

Read the complete Home Visiting State Plan here:

http://www.del.wa.gov/publications/development/docs/HVUpdatedStatePlan.pdf

Acronym List and Resource Links

Introduction to Home Visiting:

https://youtu.be/D_kUP4ZUqmg https://www.youtube.com/watch?v=0JK82-3CLLU

HVSA (Home Visiting Services Account): The portfolio of home visiting programs funded by the state of Washington. The HVSA is managed by DCYF and supported by the "Trio" (DCYF, DOH, and Start Early Washington).

DCYF (Department of Children, Youth and Families): State agency that funds home visiting programs through the HVSA. In addition to managing the contracts for the home visiting program, DCYF is involved in: policy conversations with the legislature about home visiting, managing the state's federal (MIECHV) contract, and guiding the overall strategy and vision for the HVSA. https://www.dcyf.wa.gov/

Start Early Washington (Start Early WA): Nonprofit organization that provides implementation support to Washington home visiting programs through training and technical assistance. The Hub provides support to grantees on model fidelity, training, coaching, continuous quality improvement, public awareness and community engagement. https://www.theounce.org/what-we-do/programs/washington/

DOH (Department of Health): DOH provides data and evaluation support to the HVSA and are the main holders of HVSA home visiting data. Their work includes pulling data from home visiting programs and processing it for federal funder reports, working with home visiting programs to improve data quality, and producing the Washington State Home Visiting Needs Assessment that informs how home visiting programs should be expanded across the state.

LIA (Local Implementing Agency): An organization that provides home visiting services.

BSK (Best Starts for Kids): A King County initiative funded by a local tax levy with a wide array of early childhood programs. BSK funds many home visiting programs in King County. https://www.kingcounty.gov/depts/community-human-services/initiatives/best-starts-for-kids/background.aspx

MIECHV (Maternal, Infant, and Early Childhood Home Visiting, or *mick-VEE*): Home Visiting portfolio funded by the federal government (specifically, the Health and Human Services Administration, or HRSA). These funds are contracted to DCYF, who then contracts them out to local programs. https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview, https://homevisitingcoalition.com/what-is-miechv/

Technical Assistance (TA): Targeted and customized supports by a professional(s) with subject matter and adult learning knowledge and skills to develop or strengthen processes, knowledge application, or implementation of services. Start Early Washington, DCYF, and DOH all provide varying types of TA to HVSA- funded home visiting programs.

Region X: The federally funded region consisting of Washington, Oregon, Idaho, and Alaska.

Evidence-Based Home Visiting Models: Models that have been rigorously evaluated through randomized control trials to prove that their specific home visiting curricula and components lead to their identified outcomes.

NFP (Nurse Family Partnership): A home visiting model that pairs a registered nurse home visitor with first-time moms. NFP serves children from early pregnancy to the child's second birthday. Start Early Washington houses an NFP State Nurse Consultant who provides TA and other model supports to NFP programs in Washington. https://www.youtube.com/watch?v=qFlDWmOiWEk

PAT (Parents as Teachers): A home visiting model focused on healthy development, parenting knowledge, and strong parent-child interactions. Families are served from pregnancy through the child's fifth birthday. Start Early Washington houses the Parents as Teachers Washington State Leader, who provides TA and other model supports to PAT programs in Washington.

https://www.youtube.com/watch?v=q67P1D_j2lo&t=0s&index=2&list=PLqstCl02uz3DRp7Sulr9ShyQw9E Et2MWZ

ParentChild+: A home visiting model focused on school readiness, early literacy, child development. Families of children aged 2-4 participate for two years and are matched with a home visitor from their same culture. Start Early Washington houses the ParentChild+ State Director, who provides training and technical assistance for ParentChild+ home visiting programs in Washington. https://www.youtube.com/watch?v=EIAOspJmw-E

- FCC (Family Child Care): A new model developed for ParentChild+ programs where a ParentChild+ educator provides the model in family childcare centers (instead of directly to families). This work is currently funded in King County by the City of Seattle and United Way of King County.

Family Spirit: A home visiting model that incorporates tribal traditions and teachings and was designed for implementation in tribal communities.

Early Head Start (EHS): A federally funded program that provides both home-based and center-based services for young families. The HVSA currently funds one EHS home visiting program.

Promising Practice Home Visiting Models: Innovative models of home visiting that have not been formally evaluated through a randomized control trial.

- ODP (Outreach Doula Program): Open Arms Perinatal Services developed this model, which
 provides doulas from early pregnancy through age 2. Doulas are from the same communities as
 the families they serve, and home visits are delivered in the mother's native language.
 https://www.youtube.com/watch?v=SONRs-ylsSY
- **CPP (Child-Parent Psychotherapy):** This model is designed for families that have experienced at least one traumatic event and focuses on strengthening the attachment between child and caregiver as a mechanism for healing.
- **STEEP (Steps to Effective, Enjoyable Parenting):** A home visiting model that aims to promote healthy parenting and prevent social-emotional problems among babies in families facing risk factors such as poverty, social isolation, or a history of troubled relationships.

CQI (Continuous Quality Improvement): A process through which home visiting programs improve their service delivery by brainstorming and then testing small, incremental changes to their practice. Start Early Washington houses a Manager of Quality Improvement who supports HVSA-funded programs in CQI projects.

NEAR@Home Toolkit: A document created by a team of Region X professionals that provides guidance to home visiting programs on how to safely have conversations about childhood trauma with families. Start Early Washington is also developing a facilitated learning process to support home visiting programs with integrating the toolkit into their practice. https://www.nearathome.org/

Implementation Science: A body of research from the National Implementation Resource Network (NIRN) that lays out the conditions that need to be met for a program to be successful. Implementation Science is used across the HVSA to inform how programs receive support. http://nirn.fpg.unc.edu/learn-implementation

Educational Resources and Links

DCYF Home Visiting Site: https://www.dcyf.wa.gov/services/child-dev-support-providers/home-visiting

Washington State Home Visiting Needs Assessment:

https://www.dcyf.wa.gov/sites/default/files/pdf/OFCHI HVNA report.pdf

Washington State Home Visiting Scan: https://www.dcyf.wa.gov/sites/default/files/pdf/HVScan.pdf

Washington State Home Visiting Expansion Plan:

https://www.dcyf.wa.gov/sites/default/files/pdf/reports/HVReport2019.pdf

MIECHV Home Visiting Site: https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview

Home Visiting Model Websites:

Child-Parent Psychotherapy: http://childparentpsychotherapy.com/

Early Head Start: https://eclkc.ohs.acf.hhs.gov/ncecdtl

Family Spirit: https://www.jhsph.edu/research/affiliated-programs/family-spirit/index.html

NFP (Nurse Family Partnership): http://www.nursefamilypartnership.org/

Outreach Doula Program (ODP): https://www.openarmsps.org/programs/outreach-doula-services/

PAT (Parents as Teachers): https://parentsasteachers.org/

ParentChild+: https://www.parentchildplus.org/

STEEP (Steps Toward Effective, Enjoyable Parenting): https://ceed.umn.edu/steep-sib/

COMPARISON: HOME VISITING MODELS



The Home Visiting Services Account invests in and uses a portfolio approach to fund a range of models and programs, supporting HV that will meet the needs of diverse populations. The continuum of programs funded by the HVSA includes not only evidence-based practices but also research-based and promising practice models.

Model		Description
Child-Parent Psychotherapy	Promising practice	Support and strengthen the relationship between a child and caregiver as a vehicle for restoring the child's sense of safety, attachment, and appropriate affect and improving the child's cognitive, behavioral, and social functioning after a traumatic event
EarlyHead Start- Home Based	Evidence-based	Through home visits and group socialization activities, enhance the development of infants and toddlers while strengthening families, with a focus on child development and early childhood education; principles of child health, safety, and nutrition; adult learning principles; and family dynamics
Family Spirit	Evidence-based	Through the use of paraprofessionals from the community as home visitors and a culturally focused, strengths-based curriculum, support young parents from pregnancy to 3 years post-partum. Parents gain knowledge and skills to promote healthy development and positive lifestyles.
Nurse- Family Partnership	Evidence-based	Through a therapeutic relationship, promote a mother's abilities and behavior change to protect and promote her health and the well-being of her child, allocating time in each activity to address individualized goals and needs
Parents as Teachers	Evidence-based	Parent-child interaction using activity and book-sharing; development-centered parenting; family-centered assessment and goal-setting; resource network for family well-being; health, vision, hearing, developmental screenings
Parent-Child Home Program	Research-based	Through modeling, demonstrate and encourage parent-child interactions and literacy skills, focusing on building meaningful relationships with the families and supporting parents in their role as their children's first and most important teachers
Community Doula/ Partnering with Families for Early Learning	Promising practice	Offer information on health education and childhood development to enhance the parent-child relationship, maternal and child health, healthy birth outcomes and build children's language, literacy and social-emotional skills
Steps Toward Effective, Enjoyable Parenting	Promising practice	Build a secure attachment between parents and children by working alongside parents to help them understand their child's development, respond sensitively and predictably to their child's needs, identify and strengthen support networks for themselves and their child, reflect on their own relationship history and make decisions that ensure a safe and supportive environment for their child and the whole family

HOME VISITING SERVICES ACCOUNT

Local programs offering targeted, voluntary, long-term parent coaching and support to families. Models include evidence-based, research-based and promising practice programs.

County	Organization Name	Model	Contact Information
Adams	Columbia Basin Health Association	PAT	(509)488-5256
Benton	Yakima Valley Farm Workers Clinic	PAT	(509)865-7630
Chelan	Chelan Douglas Health District	NFP	(509)886-6400
Clallam	First Step Family Support Center	PAT	(360)457-8355
Clark	Clark County Public Health	NFP	(360)397-8000
Cowlitz	Clark County Public Health	NFP	(360)397-8001
Douglas	Catholic Charities	PAT	(509)965-7100
Franklin	Benton-Franklin Health District	NFP	(509)460-4200
FIGURIII	Columbia Basin Health Association	PAT	(509)488-5256
Grays Harbor	Grays Harbor County Public Health and Social Services	PAT	(360)500-4065
Grant	Columbia Basin Health Association	PAT	(509)488-5256
Jefferson	Jefferson County Public Health Dept	NFP	(360)385-9400
	Atlantic Street Center	Parent Child+	(206)329-2050
	Chinese Information and Service Center	Parent Child+	(206)573-5221
	Denise Louie Education Center	EHS	(206)767-8223
	El Centro de la Raza	PAT	(206)957-4634
	Friends of Youth	PAT	(425)869-6490
	InterCultural Child & Family Services	СРР	(425)322-4297
King	Mary Bridge Children's Foundation (MultiCare Health System)	STEEP	(253)403-4517
· ·	Navos	CPP	(206)248-8226
	Northshore Youth and Family Services	PAT	(425)485-6541
	Open Arms Perinatal Services	Outreach Doula	(206)723-6868
	Seattle - King County Dept of Public Health	NFP	(206)477-6262
	United Indians of All Tribes Foundation	PAT	(206)285-4425
	West African Community Council	Parent Child+	(206) 636-9882
Kitsap	Jefferson County Public Health Dept	NFP	(360)385-9400
	Centralia College	PAT	(360)623-8449
Lewis	Community Youth Services	PAT	(360)943-0780
Lewis	Thurston County Public Health and Social Services Dept	NFP	(360)867-2545
Lummi Nation	Lummi Indian Business Council	Family Spirit	(360)312-2000
Mason	Thurston County Public Health and Social Services Dept	NFP	(360)867-2545
Okanogan	Okanogan County Child Development Association	PAT	(509)826-2466
- Chanogan	Atlantic Street Center	Parent Child+	(206)329-2050
	Institute for Family Development	PAT	(253)874-3630
Pierce	Mary Bridge Children's Foundation (MultiCare Health System)	STEEP	(253)403-4517
ricice	Open Arms Perinatal Services	Outreach Doula	(206)723-6868
	Tacoma Pierce County Health Dept	NFP	(253)798-6403
	Brigid Collins Family Support Center	PAT	(360)428-6622
Skagit	Skagit County Public Health Dept	NFP	(360)416-1523
	ChildStrive- NFP	NFP	(425)245-8377
	ChildStrive- PAT	PAT	(425)245-8377
Snohomish	Friends of Youth	PAT	(425)869-6490
31101101111311	Northshore Youth and Family Services	PAT	
	Open Arms Perinatal Services	Outreach Doula	(425)485-6541 (206)723-6868
		PAT	_ ` ′
Spokane	Children's Home Society of Washington - Spokane Spokane Regional Health District	NFP	(509)747-4174
Squamich Nation		_	(509)321-1621
Squamish Nation	Suquamish Tribe Community Youth Services	PAT	(360)394-9428
Thurston	Community Youth Services Thurston County Bublic Health and Social Services Dent	PAT	(360)943-0780
Mahkial	Thurston County Public Health and Social Services Dept	NFP	(360)867-2545
Wahkiakum	St. James Family Center	PAT	(360)795-8612
Walla Walla	Children's Home Society of Washington - Walla Walla	PAT	(509)529-2130
Whatcom	Lydia Place	PAT	(360)671-7663
	Whatcom County Health Dept	NFP	(360)778-6100
	Catholic Charities of the Diocese of Yakima	PAT	(509)965-7100
Yakima	West Valley School District #208	Parent Child+	(509)972-4128
	Yakima Valley Farm Workers Clinic	PAT	(509)865-7630
	Yakima Valley Memorial Hospital Association	NFP	(509)574-3251

Home Visiting Models

Parents as Teachers	PAT	Evidence Based
Nurse- Family Partnership	NFP	Evidence Based
Parent Child+	Parent Child+	Research Based
Early Head Start	EHS	Evidence Based
Child-Parent Psychotherapy	СРР	Promising Practice
Outreach Doula	Outreach Doula	Promising Practice
Family Spirit	Family Spirit	Evidence Based
Steps Toward Effective, Enjoyable Parenting	STEEP	Promising Practice

Community Based Child Abuse Prevention Programs

Local funded programs work to build strong families and reduce child abuse as part of our Community Based Child Abuse Prevention and Temporary Assistance for Needy Families funding.

County	Organization Name	Program Type	Contact Information
Clallam	First Step Family Support Center	Perinatal Mental Health Community Capacity Building	(360)457-8355
Cowlitz	Youth and Family Link	Perinatal Mental Health Community Capacity Building	(360) 423-6741
Grays Harbor	Connections	Trust Based Relational Intervention	(360) 249-0005
King	Center for Human Services	Disciplina Positiva – Positive Discipline	(206) 362-7282
King	Chinese Information and Service Center	Bilingual/Bicultural Kaleidoscope Play & Learn	(206) 624-5633
Okanogan	Room One	Group-Based Parenting and Wrap-Around Family Support	(509) 997-2050
Pierce	Step by Step Family Support Center	Perinatal Mental Health Community Capacity Building	(253) 896-0903
Skagit	Skagit County Public Health Department	Perinatal Mental Health Community Capacity Building	(360) 630-8352
Snohomish	Childstrive	Perinatal Mental Health Community Capacity Building	(425) 353-5656
Spokane	Catholic Charities Eastern Washington	Circle of Security Parenting	(509) 624-7821
Whatcom	Whatcom County Health Department	Perinatal Mental Health Community Capacity Building	(360) 778-6100
Yakima	Yakima Valley Memorial Hospital	Perinatal Mental Health Community Capacity Building	(509) 575-8000
Takilla	The Memorial Foundation on behalf of Children's Village	Strengthening Families for Yakima County Parent to Parent Program	(509) 576-5794

Home Visiting Advisory Committee Conflict of Interest Policy

The Home Visiting Advisory Committee (HVAC) is intentionally comprised of members from diverse professional experiences and areas of expertise to inform its funding decisions about the Home Visiting Services Account (HVSA). Input from actors that are directly affected by HVAC decisions is essential to responsive and responsible decision-making, but also requires a clear conflict of interest policy to ensure that home visiting funds are being distributed equitably and objectively.

The following types of relationships with organizations that receive or could receive home visiting funding from the HVSA constitute a conflict of interest and should be disclosed to the advisory committee. Involvement with an organization extends to the HVAC member's spouses/partners and dependents and covers any involvement during the past 12 months, whether or not still current. Relationships include:

- Salary or position funding (partial or full) or "in-kind" support of program
- Consulting fees or honoraria including honoraria from a third party, gifts or in-kind compensation for consulting, lecturing, travel, or other purpose
- Grants, contracts, subcontracts, or any other compensation arrangement
- Officer, trustee, Board member, or any other fiduciary role, whether or not compensation is received for service
- Other financial benefit (please specify)

If you are aware of these or any other relationships with an organization that might be perceived by others as potentially influencing your objectivity in decisions about HVSA funding, please disclose the relationship in accordance with the procedures below.

Members must submit a signed Disclosure Form (below) annually and on any other occasions requested by HVAC leadership. Disclosure Forms must also be completed and signed at the time of appointment to the HVAC. Members have an ongoing obligation to disclose any potential conflict or duality of interest about HVAC decisions. In other words, members must disclose any conflict or duality of interest that arises after the submission of this form. Each subsequent disclosure must describe the nature of the real, perceived, or potential conflict of interest and all facts known relating to it.

The attached form will be received by HVAC Chairs to determine whether any disclosures constitute a conflict or duality of interest. HVAC Chairs will have the right to inquire further with regard to your disclosure and, in the event they determine there to be a conflict or appearance of conflict of interest, they will determine your eligibility to serve as a voting member of the HVAC. The existence of a relationship as defined above does not necessarily imply ineligibility to serve, but rather that participation in some matters may be modified or avoided; in particular, members with a conflict of interest will not be eligible to vote on matters pertaining to funding decisions. These abstentions will be noted in the minutes for the meeting.

The responsibility for identifying a potential conflict of interest rests with the member. If you have any questions as to whether or not there is a conflict, you should first address the matter with HVAC leadership.

Home Visiting Advisory Committee Conflict of Interest Disclosure Form

feel that:
\square I do not have any relevant relationships to disclose and no perceived conflict of interest
☐ I am disclosing the following relationships which may constitute a conflict of interest (please include the name of the organization and a detailed description of the relationship:
1.
2.
3.
4.
I understand that this information will be retained in the files of the HVAC and will be available for review by members or others who inquire.
I acknowledge that it is my responsibility to ensure that my disclosure information is current and complete and to update my disclosure records throughout the year if my relevant relationships change
Name:
Signature:
Date:

Home Visiting Advisory Committee Confidentiality Agreement

The Home Visiting Advisory Committee (HVAC) is in <u>statute</u> with the purpose to advise the "Home Visiting Services Account (HVSA) partnership regarding research and the distribution of funds from the account to eligible programs." All members of the HVAC were selected based on the vital insight needed to achieve this goal. While not engaging in specific model advocacy work, the HVAC provides crucial support to Washington State's home visiting systems building and expansion of services.

As a member of the Home Visiting Advisory Committee (HVAC) I understand that I have access to confidential information used to enhance the decisions and work of the Home Visiting Service Account (HVSA). I understand that all the information through the HVAC accessed by me in the course of my membership work is confidential unless indicated otherwise.

I hereby agree to:

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- Keep the deliberations of the HVAC and any and all information, whether verbal or in the form
 of papers, documents, assessments, electronic communications, or in any other form or format,
 which comes into my possession or knowledge in my capacity as a HVAC member and relates to
 the HVSA, confidential unless given authorization from HVAC leadership that the material may
 be shared.
- 2. Not divulge, publish or otherwise make known to unauthorized persons the sensitive information from the HVAC about the HVSA to maintain the integrity of the committee's decisions.
- Maintain the obligation to keep confidentiality described in the above paragraphs both during my period as an HVAC member and at any and all times thereafter.

I have read, understand and agree to abide by the terms of this Confidentially Agreement as a condition of my service as a Home Visiting Advisory Committee member.

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Signature: _			
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Date:			