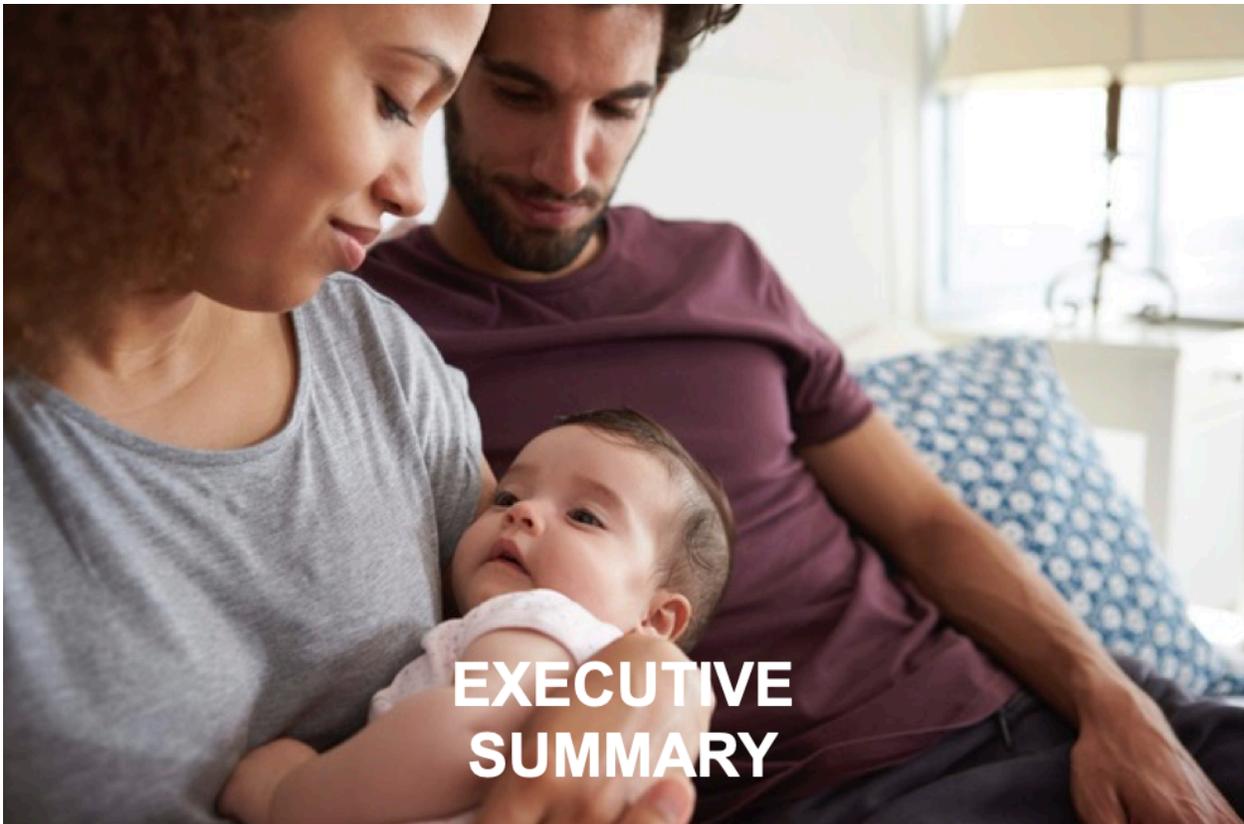




ANNUAL REPORT

2018





EXECUTIVE SUMMARY

2018 was bookended by two major accomplishments for the home visiting field and the Association of State and Tribal Home Visiting Administrators (ASTHVI). The year opened with uncertainty and anxiety: authorization for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program had lapsed, and its reauthorization language was stuck in legislative purgatory despite bipartisan support. After a massive field-wide effort, MIECHV was reauthorized in early February in milestone legislation that gave the program five years of programmatic and financial stability. ASTHVI was a deeply engaged partner in the Home Visiting Coalition, compiling and sharing information about the impact of the authorization gap as part of the effort to bring MIECHV across the legislative finish line.

Even before reauthorization was complete, ASTHVI started looking ahead to another significant event for home visiting: the release of the Mother and Infant Home Visiting Program Evaluation (MIHOPE) in late 2018. While we had confidence that the national evaluation would document positive results, we also understood that a coordinated, field-wide effort would be needed to place this large study, using data from MIECHV's early years, in the context of the rich and deep body of home visiting research. Generous support from the

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Robert Wood Johnson Foundation and the Heising-Simons Foundation allowed ASTHVI to pull together a team of more than 40 experts from across the home visiting field to respond in real-time to the release of the MIHOPE Implementation Report in October and produce *Research for Results: The Power of Home Visiting*. This white paper is a curated collection of highlights from recent and ongoing studies demonstrating the impact of home visiting across different models, communities, and outcomes.

2019 will bring new challenges and opportunities, including the release of the MIHOPE Impact Report. It is the first calendar year since 2014 that MIECHV and its administrators can focus on innovation without the need for an extension or reauthorization. The new year brings an exciting opportunity to think broadly, boldly and creatively about how the field of home visiting can provide even more effective services to even more children and families. ASTHVI looks forward to working with its members and partners to take home visiting to even greater heights in 2019.



ASTHVI Members Anne Plagge and Janet Horras talk home visiting with Senator Chuck Grassley (R-IA) at the the ASTHVI Congressional reception.

2018 highlights include:

- Reauthorization of MIECHV for five years at current funding levels with positive legislative language.
- Facilitation of the multidisciplinary expert panel providing high-level guidance for the implementation of a free, national online training system offering professional development in core competencies needed by family support professionals.
- Creation of the MIHOPE Evaluation Advisory Committee, comprised of administrators, researchers, model representatives, advocates, and policy and communications experts, to educate stakeholders and the public about research supporting innovation in and documenting outcomes of home visiting.
- Field-wide dissemination of talking points and background materials on the day that the MIHOPE Implementation Report was released.
- Facilitation and communication of administrator consensus regarding proposed changes to MIECHV data collection standards, the updated field-wide needs assessment, and other proposed policy changes, resulting in responsive amendments that will facilitate efficient and effective program administration.
- Inclusion as a thought partner in home visiting leadership groups and discussions, including those hosted by HRSA and ACF, the National Alliance of Home Visiting Models, the Home Visiting Coalition, and the home visiting network Advisory Committee.
- Preparation and release of Research for Results: The Power of Home Visiting, a policymaker-friendly white paper presenting the findings of 33 evaluations of home visiting impacts across multiple models, communities and outcomes.



ASTHVI'S MISSION

The Association of State and Tribal Home Visiting Initiatives is a non-profit, non-partisan, non-advocacy 501(c)3 association of administrators of state, Tribal, and territorial home visiting programs. Our members work for state health agencies, child welfare agencies, departments of early learning, Tribal governments, and non-profit organizations designated to administer home visiting funds on behalf of a Tribe or state. While the majority of our members administer funds awarded under MIECHV, others oversee home visiting programs funded by TANF, Medicaid, state Departments of Education, or other funders.

ASTHVI's mission is to support state, Tribal and territorial administrators of home visiting initiatives by facilitating peer networking, accelerating exchange of information and best practices, and communicating the implications of proposed policies that may impact the effectiveness or efficiency of home visiting in communities across the country. We are a member-driven organization, staffed in Washington DC under the direction of a national Steering Committee of home visiting administrators elected by the membership.



MIECHV Reauthorization

Home visiting stakeholders, including ASTHVI, began working in 2016 to help inform policymakers about the impact of MIECHV funding and services in anticipation of reauthorization in 2017. ASTHVI and its member administrators are recognized by partner organizations and policymakers as a vital source of expert, non-partisan, non-advocacy information about voluntary home visiting across the country. When the first reauthorization proposal was introduced in summer 2017, ASTHVI was the first national organization to respond, sharing a detailed analysis of the legislation that identified sections of the bill that administrators felt would have a positive impact, as well as those that caused concern. After much hard work by many stakeholders, a bipartisan policy consensus was created, but 2017 came to a close without passage of a reauthorization bill.

MIECHV entered 2018 in limbo, with states enacting hiring freezes, enrollment delays, and other steps to conserve resources to complete services for existing families. ASTHVI's Rapid Resource Team (RRT) of home visiting administrators, created in 2017 with the support of a grant from the Home Visiting Coalition, continued its work to gather and share information about the impact of the authorization lapse.

Thanks to a massive effort from Congressional champions and stakeholders across the country, MIECHV was finally reauthorized on February 9 as part of the Bipartisan Budget Act of 2018. To celebrate its passage, ASTHVI held a Congressional reception during our national meeting in June to honor and thank the Congressional leaders who helped push MIECHV across the finish line. We were excited to have Senators Chuck Grassley (IA), Bob Menendez (NJ), and Ron Wyden (OR) and Congressmen Bill Pascrell (NJ) and Adrian Smith (NE) join us to share a few words and express their support for MIECHV. ASTHVI is grateful to be able to move forward on field priorities that had previously been put on hold through the series of one- and two-year extensions.

2018 Steering Committee

Laurel Aparicio (VA)

Julie Becker (CO)

Kristine Campagna (RI)

Claudia Catalano (MA)

Benjamin Hazelton (OR)

Katie Hess (United Indians of All Tribes, WA)

Persephone Starks (OK)

Donna Wood (TX)



Research for Results: The Power of Home Visiting

The legislation that created MIECHV in 2010 mandated a random control study of program outcomes, known as the Mother and Infant Home Visiting Program Evaluation, or MIHOPE. While ASTHVI expected MIHOPE results to affirm the effectiveness of home visiting, most studies of this size and scope, across multiple models and outcomes, are not uniformly positive. It became increasingly clear to ASTHVI that, although MIHOPE holds potential to highlight important information and contribute to ongoing quality improvement efforts, the study's findings need to be understood in the context of other, more recent and ongoing research and evaluations. Even before reauthorization was complete, ASTHVI launched a major initiative in collaboration with partners in the field to elevate research findings on home visiting and provide context for the MIHOPE results, whatever they should prove to be.



This evaluation initiative began with the formation of an advisory committee, which included ASTHVI members and representatives of advocacy organizations, research experts, communications professionals, model developers, thought leaders, and officials with experience

in evidence-based policy and in the release of large studies of human services programs. Brainstorming with these experts and with philanthropic funders, the project focused on three deliverables: developing and executing a communications strategy to respond to the release of the MIHOPE Implementation Report; preparing and disseminating a white paper to lift up a range of home

Advisory Committee Members

Laura Alfani

Home Visiting Project Manager, Washington Department of Children, Youth and Families

Sarah Bolton

Independent Consultant

Anita Brown

Associate Director, Center for Family Research, University of Georgia

Brent Ewig

Principal, Alpine Health Strategies

Jill Filene

Executive Vice President, James Bell Associates

Jess Goldberg

Research Assistant Professor, Eliot-Pearson Department of Child Study and Human Development, Tufts University

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visiting evaluations; and supporting the field in responding to the release of the MIHOPE Impact evaluation.

Working with HARC, EDC, states, model developers, the Home Visiting Resource Center, and other partners in the field, ASTHVI solicited, obtained access to, and reviewed more than 500 evaluations of home visiting programs. ASTHVI staff narrowed this list down to approximately 40 studies that met criteria agreed to by the advisory committee: evaluations of MIECHV evidence-based models; documenting outcomes of home visiting (as opposed to process or systems changes); conducted in the last ten years; and, when taken together, covering a range of models, outcomes, geographic locations and populations in the US. Research experts prepared detailed technical summaries of the selected evaluations, using a template developed and approved by the advisory committee. Policy experts used the original evaluations, the technical summaries, and additional background research explaining the significance of the outcomes, to prepare two-page highlights of each study written in layperson language. A significant investment was made in graphic design to promote readability and easy access to important information. A preface to the white paper introduces the reader to key questions and issues in evidence-based policy and MIECHV.

While work on the white paper was underway, the advisory committee also began to prepare a response to the anticipated MIHOPE Implementation study. Anticipating that the evaluation would offer helpful insights consistent with prior evaluations and what is already known by the field, ASTHVI prepared messaging, talking points, and background materials to support the field. On November 5, the day the report was released, ASTHVI performed a quick but thorough review of findings, updated its materials, and distributed information to the home visiting community, including but not limited to state and

Julia Heany

Program Director, Center for Healthy Communities, Michigan Public Health Institute

Janet Horras

State Home Visitation Director, Iowa Department of Public Health

Karen Howard

Vice President, Early Childhood Policy, First Focus

Heather H. Johnson

MIECHV Program Data Manager, University of Alabama at Birmingham School of Public Health

Kasondra Kugler

Home Visiting Program Specialist, Washington Department of Children, Youth and Families

Mary Mackrain

Managing Project Director, Education Development Center

Sarah McGee

Chief Policy & Government Affairs Officer, Nurse-Family Partnership

Kay O'Neill

Research Associate, Bloomberg School of Public Health, Johns Hopkins University

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Tribal administrators, model developers, advocacy organizations, partners and stakeholders, and selected Congressional staff. ASTHVI also held a community-wide conference call that afternoon to share perspectives on the findings and respond to questions. Similar preparations are being made for the Impact and Cost evaluations that are expected to be released in early 2019.

“Really great job summarizing the key points and walking through the materials. You did an amazing job with no advance notice. I was blown away that you could release useful information and summarize the key points of a 411 page report that was just released this morning. That takes some skill!”

- Home visiting advocate

“The email with talking points was excellent. I have shared with my governor’s office in case we are asked any questions.”

- State administrator

ASTHVI’s white paper, entitled Research for Results: The Power of Home Visiting was released on December 5, with a follow-up Congressional briefing scheduled for January 7, 2019. The white paper includes highlights from 33 recent outcome evaluations, covering all six MIECHV benchmarks and a variety of models and geographic areas. Each research summary is prefaced by a paragraph of background information explaining the significance of the outcome and the importance of the issue being addressed in the life of young children and families. This range of research and the outcomes

Anne Plagge

MIECHV Professional Development and Technology Coordinator, Iowa Department of Public Health

Jeff Quinn

Director, Community Resources, Durham Connects

Sarita Rogers

Director, Home Visiting, Massachusetts Children’s Trust

Martha Skiles

Home Visiting Surveillance Supervisor, Washington Department of Health

Linda Smith

Director, Early Childhood Initiative, Bipartisan Policy Center

Kathy Stack

CEO, KB Stack Consulting

Roxane White

Founder and CEO, Strategy with Rox

Rachel Zaentz

Vice President, Finn Partners

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it documents will provide useful additional context for the findings of the MIHOPE Impact study when it is released in 2019. ASTHVI is deeply grateful for the generous financial support of the Robert Wood Johnson Foundation and the Heising-Simons Foundation, without which a project of this size and scope supporting the field would not have been possible.

“Truly impressive. Wonderful job with the polished and easy to read formatting. Kudos for producing a report that ASTHVI should be really proud of! I’m distributing far and wide.”

-State administrator

“Wow! Wow! What a labor of love and so beautifully presented! The intro balances what we know, what is moving forward, what needs more study and the sense of a large learning environment.”

-Early childhood funder

“It is so helpful to have these easy-to-read findings in one place. I have made this mandatory reading for all my staff.”

- State administrator

“This is a real contribution to the field. I have shared it with my Board and all my senior staff.”

-National model developer



Data Committee

The Data Committee continues to be one of ASTHVI’s largest and most active committees. One of the committee’s main priorities in 2018 was responding to HRSA’s proposed revisions to data collection standards and guidelines following the MIECHV reauthorization. These revisions included changes to data collection practices for demographic performance measures, benchmark performances, and quarterly data collection standards. In addition to specific feedback on the proposed revisions, the committee emphasized the need for clear

guidance explaining the rationale behind changes to help administrators interpret revisions more consistently and implement them more effectively. Members also expressed concerns about multiple continuous changes to home visiting measures. Understanding the importance of making adjustments to “get it right,” each change imposes a burden on state agencies and local implementing agencies. For both financial and data quality reasons, minimizing the number of changes and setting indicators that can remain constant for a number of years should be a primary goal.

In October, the Data Committee held its first in-person meeting with HRSA staff (at HRSA’s request) to go over quarterly data collection revisions in greater detail. The feedback the committee provided resulted in numerous changes, including extending the proposed deadline for quarterly performance data from 15 to 30 days; simplifying staff recruitment, retention, and vacancy tables; and removing the collection of potentially identifiable location data from place-based services.

The Data Committee also took the lead in responding to the updated field-wide needs assessment as required by the reauthorization legislation. With program expansion limited by flat funding, administrators were eager to ensure that the updated needs assessment would not result in the closure of current programs serving eligible families and communities. The committee made several additional recommendations to decrease the data collection burden.

Data Committee Membership

Janice Fries (MT), Co-Chair
Angela Miller (TN), Co-Chair
Laura Alfani (WA)
Sarah Bowman (RI)
Anita Brown (GA)
Greer Cook (NC)
Ramona Danielson (ND)
Jacqueline Farber (IL)
Vinetta Freeman (DC)
Jessica Goldberg (IL)
Karen Harbert (MO)
Benjamin Hazelton (OR)
Julia Heany (MI)
Carrie Higgins (IN)
Thomas Hinds (WI)
Virginia Holland (FL)
Kasondra Kugler (WA)
Cheryl LeDoux (AR)
Susan Manning (MA)
Andrea Mayo (TX)
Stacey McKeever (IL)
Bala Venkata Subbarao Mutyala (IL)
Morgan Paine (VT)
Drewallyn Riley (OR)
Lesley Schwartz (IL)
Christine Silva (MA)
Davida Singleton (TN)
Martha Skiles (WA)
Carla Snodgrass (TN)
Megan Squires (NC)
Nichole Sturmfels (CA)
Amber Viitanen (CO)
Teresa Vollan (WA)
Erin Whitham (ME)
Mary Anne Wilson (IL)
Ginny Zawistowski (MN)



Family First

Along with the MIECHV reauthorization, the Bipartisan Budget Act of 2018 included an historic refocusing of child welfare programs called Family First. This language emphasized evidence-based prevention programs, including home visiting, that can be offered to families to help avert child abuse or neglect and the need for more drastic intervention. Following the passage of Family First, ASTHVI engaged with child welfare organizations and the Administration for Children, Youth and Families to learn more about the opportunities for home visiting and child welfare agencies to collaborate and build home visiting initiatives into state child welfare plans. ASTHVI continues to offer information and technical assistance to members who are working with their state agency counterparts to serve families at risk of child neglect and abuse.



ASTHVI Steering Committee member Kristine Campagna honors Senator Bob Menendez (D-NJ).



Institute for the Advancement of Family Support Professionals

As ASTHVI members look forward to addressing the needs of the field, professional development is a continuing priority. It is therefore natural that ASTHVI would be engaged in supporting the Institute for the Advancement of Family Support Professionals by facilitating

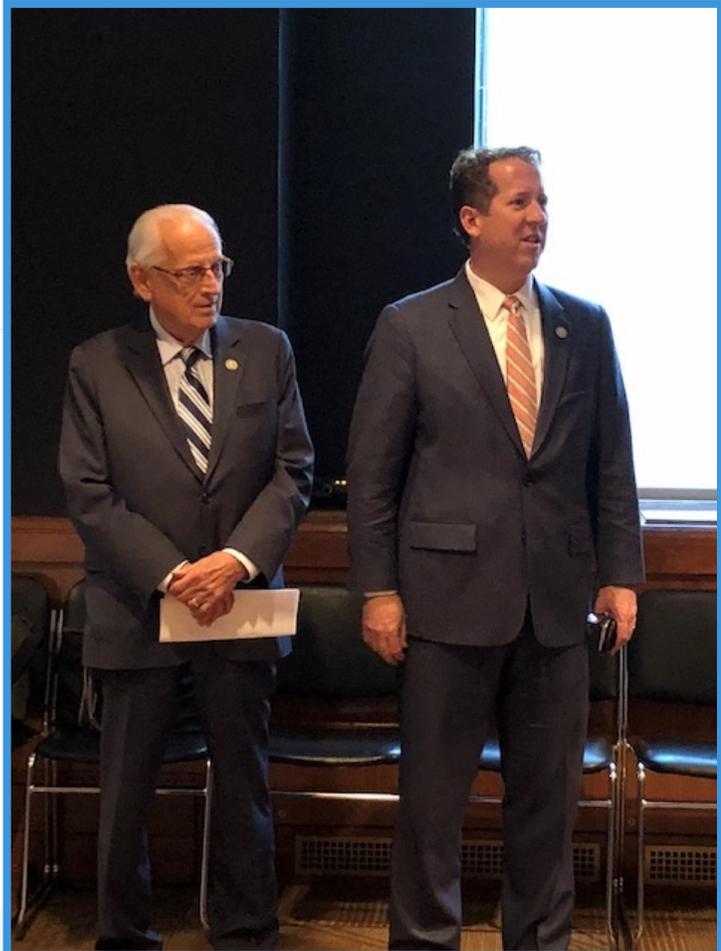
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the Institute's Expert Panel, or "board of directors." Following groundwork laid in 2017, the Panel met in two in-person sessions that resulted in significant contributions to the project.

The Expert Panel's role is to provide high level, strategic guidance that ensures that the products of the IAFSP meet the needs of states, Tribes, home visiting models, and the field; that training most needed by the field is prioritized; and that training has national and multi-cultural relevance, usefulness, and applicability. The Panel is made up of home visiting administrators, national model representatives, and national experts in child health and mental health, support for children with disabilities and their families, parent engagement, and adult education.

In 2018, the Institute's implementation team developed a proposed set of national home visiting core competencies upon which the full set of training and certification would be based. The Expert Panel's most important task at the February 2018 meeting was to validate the core competencies upon which the Institute's training modules are based. Review of the proposed core competencies resulted in a robust debate over the breadth and depth of the core competencies. The Panel agreed that the core competencies should push the field forward, and that "core" is not synonymous with "basic." However, concern was expressed that an overly ambitious set of required competencies could hinder adoption in some states. Further, concern was expressed that the original description of the core competencies was too focused on knowledge acquisition, and under-emphasized a home visitor's ability to access, explain and use information to respond to family needs.

Ultimately, the Panel recommended re-drafting the core competencies to shift emphasis from knowledge acquisition to knowledge application. In response to Panel recommendations, an



Honorees Rep. Bill Pascrell (D-NJ) and Chairman Adrian Smith (R-NE) attend the ASTHVI Congressional reception.



Steering Committee member Benjamin Hazleton presents award to Senator Ron Wyden (D-OR).

introduction was added to each competency describing what it is intended to do and how it should be used; MIECHV benchmarks underpinned by each competency were also explicitly identified.

Following these revisions, the Panel approved the framework. As of the end of 2018, the National Family

Support Competency Framework had been officially endorsed by more than a dozen organizations. The second in-person meeting of 2018 centered on defining what the Panel wants this work to do for the home visiting workforce, standardizing the essential components of home visiting and providing a cost-effective way for states and models collaboratively to improve the quality of the workforce and of the field.

As part of that vision, the Expert Panel encouraged the Institute to prioritize the identification and integration of existing, external training materials. Panelists believe that having the Institute serve as an aggregator of

training resources would increase state and local buy-in to the system while alleviating the burden on the Institute to create similar content. How best to curate, upload and integrate these materials remains a conundrum and topic of ongoing conversation.

Panelists spent a significant part of the meeting brainstorming ways to continue the work of the Institute after the current grant runs out, and to promote the available resources. The Panel agreed that it would be best to wait to start actively promoting the Institute further until

the Career Compass and certification exam were ready to go, having heard from a number of states that they were waiting for those resources to be available before asking home visitors to start going through the training modules. The conversation about future funding and support was less straightforward, but the Panel generated several new ideas for the Institute to consider.



A final in-person meeting will be held in mid-2019 as the work under the innovation grant draws to a close. Generous funding was provided to ASTHVI by the Heising-Simons Foundation to support staffing of the Expert Panel and underwrite travel and other costs associated with the Panel's work.

2019

With MIECHV funding secured until 2022, the home visiting field has the opportunity to focus on innovation and outcomes. ASTHVI's agenda for 2019 will include continued work with HRSA to implement the new legislation; providing resources to policymakers and the field regarding the MIHOPE Impact report and home visiting evaluations; and working with partners to further the development of a home visiting network that facilitates communication, collaboration, and acceleration of the impact of home visiting to help children, families and communities.

AND BEYOND



Member Comments

ASTHVI National Meetings 2018

The part of the meeting that was most useful to me were the conversations and discussions at the tables. As a new person to home visiting it was helpful and useful to get a background on home visiting and the challenges that it faces.”

I love these meetings. I find comfort learning that other states are having the same challenges we are.”

I really felt the discussion around the MIHOPE study was beneficial and I look forward to the white paper.”

I always enjoy the small group discussions with other grantees. These meetings always make me think and work, which isn't true for other meetings. I really appreciate it.”

It was helpful to hear the challenges and opportunities from other states/Tribes.”

I appreciate the opportunity to talk with other states about MIECHV implementation. The discussion about MIHOPE was very helpful.”

ASTHVI meetings are always worth the travel time.”

All the small group discussions were valuable, especially the opportunity to learn from other states/Tribes.”



ASSOCIATION OF STATE AND TRIBAL
HOME VISITING INITIATIVES

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