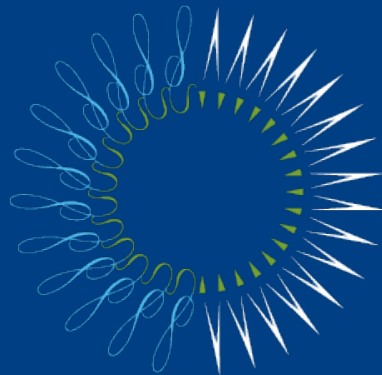




Thank you for joining this webinar hosted by Pew's home visiting campaign: “How State Legislation Advances Home Visiting”

We will be starting shortly at which time you will hear the audio presentation. In the meantime, please feel free to use the questions function to send us any questions or comments you may have.



THE
PEW
CHARITABLE TRUSTS

HOME VISITING CAMPAIGN WEBINAR:

HOW STATE LEGISLATION ADVANCES
HOME VISITING

September 10, 2013



Introduction:

Karen Kavanaugh

Director, Home Visiting, The Pew Charitable Trusts

Featured Discussants:

Ingrid Stegemoeller

State Policy Associate, Home Visiting, The Pew Charitable Trusts

State Senator Danté Bartolomeo (D-CT)

Co-Chair of the Children's Committee

Elaine Zimmerman

Executive Director, Connecticut Commission on Children

Cindy Heine

Associate Executive Director, Prichard Committee for Academic Excellence

Dustin Miller

Partner, Government Strategies, LLC

Jesse Leinfelder

Manager, Federal Home Visiting Program, New Mexico

Reminders:

- Audio lines are automatically muted on this webinar
- Ask questions by using the “Questions” function in your control panel
- Use the “Questions” function to also let us know if there are problems with the audio
- This webinar is being recorded and will be posted to our website at:
pewstates.org/hv-webinars

Advancing smart state and federal policies and investments in high-quality, home-based programs for new and expectant families.

Our primary focus areas include:

- Policy Advocacy
- Research
- Information Sharing



pewstates.org/homevisiting



Ingrid Stegemoeller
State Policy Associate, Home Visiting
The Pew Charitable Trusts



State Senator Danté Bartolomeo (D-CT)
Co-Chair of the Children's Committee



Elaine Zimmerman
Executive Director
Connecticut Commission on Children

The Early Care System and Home Visitation



**SENATOR DANTÉ BARTOLOMEO
CO-CHAIR, CHILDREN'S COMMITTEE**

**ELAINE ZIMMERMAN
EXECUTIVE DIRECTOR, COMMISSION ON CHILDREN**

Early Care System



Connecticut sought to create an integrated early care system with home visitation, focused on parents and infants and toddlers and our early care and education system, focused on infant, toddler and pre-k care.

We designed this system with our State Advisory Council (SAC), known as the Governor's Early Care and Education Cabinet.



SAC

W O R K G R O U P S

Workgroups were established in our State Advisory Council that included:

- standards
- a quality rating system
- workforce development
- data development
- health
- public-private partnerships
- home visitation and parent engagement

Home Visitation and Parent Engagement Workgroup



The home visitation and parent engagement workgroup sought to embed a nurturing infant-toddler system for those most vulnerable families within a system of early care. We understood home visitation to offer the beginnings of an infant-toddler care system and policy base, for new families.



We strove to...



- treat parents as assets and partners;
- bring in dads in an engaged manner;
- ensure that home visitation programs were customer-friendly;
- offer choices for parents;
- ensure that home visitation was framed in language that could be understood by the family;
- improve upon a child's social emotional experiences for optimal behavioral and mental health;
- ensure the exposure to oral language and early literacy;
- facilitate family support linkages and build barriers to child trauma and child poverty;
- ensure optimal funding streams for early assessment and intervention; and
- link home visitation as a part of a comprehensive preventive mental health plan and system

Our team was one of a few states selected through a competitive grant process, to meet in Chicago from June 6-8, 2012. We worked with Zero to Three, Pew Charitable Trusts, NCSL and



other states to ascertain how to best integrate, blend or braid policies and strategies that would realistically integrate home visitation and early care, and create more of a seamless and coherent system for the family, prenatal to age five.

At this meeting we agreed to:



- **Bolster early care and home visitation collaborations**
- **Provide training across home visitation models**
 - Trauma
 - Early language and vocabulary development
 - Father engagement
 - Special healthcare needs
- **Create a continuum of our model programs that is parent-friendly**
- **Track the flow of all home visitation funds**
- **Bring in new stakeholders such as pediatricians and brain research experts**
- **Establish no wrong door for entry**
- **Create a central referral process**

Some of these action steps and others, became part of our mental health bill, led by Senator Danté Bartolomeo.





Our design of a prevention-focused mental health plan sought to reach children early with prevention strategies that are proven. The legislation passed with unanimous bipartisan support in both houses, as one of several focused policy responses to the Newtown massacre.



Angel
By Anna Cartelli

The social emotional/mental health facts:

- The mind develops as the interface between human relationships and the unfolding structure and function of the brain.
- Emerging research shows evidence of altered brain functioning as a result of childhood trauma. A single traumatic experience can alter an adult's brain.
- Childhood stressors can lead to health problems later in life including alcoholism, depression, eating disorders, heart disease and other chronic diseases. (CDC, 2008, *The Effects of Childhood Stress on Health Across the Lifespan*).
- Mental health does not just impact the person facing emotional challenges. It impacts the family system. The impact of mental illness on families can be multidimensional and very severe, affecting everything from finances to emotional health.

The mental health bill sought to bolster children's optimal emotional health by creating a comprehensive bill across issue and funding streams that offers preventive, proven, community supports. We worked with experts in children's mental health, early childhood and home visitation.



August 16,
2013

Public Act 13-178



The bill includes the following:

- a) improved coordination between community mental health, the school, school-based health centers, and emergency mobile psychiatric service providers;
- b) **family strengthening through home visitation and a system of home visitation programs;**
- c) professional development of early childhood providers and pediatricians in the prevention and early identification of mental health problems and in Infant and Early Childhood Mental Health Competencies;



- d) an early intervention system in assessment of mental health challenges for children with full utilization of federal EPSDT requirements in screening and assessment;**
- e) formalized partners and referrals to mental health practitioners and/or trained staff in early social emotional issues in the Birth to Three system;**
- f) improved utilization of data and data driven planning across pertinent domains in child mental health for quality assurance;**



- g)** expansion of trauma informed interventions and practices and curriculum and training in trauma informed practices;
- h)** expansion of mental health screening programs accompanied by available clinical services;
- i)** training of school resource officers to ensure proven and proper response with minimal over or under referrals based on demographics; and
- j)** information for parents on signs of child development and how to tell if your child would benefit from mental health intervention.



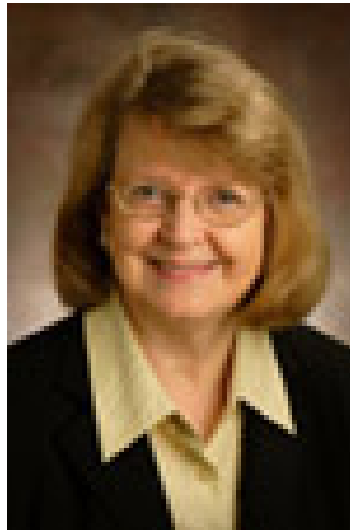
The home visitation section requires the Office of Early Childhood to provide concrete recommendations for implementing the coordination of home visitation programs, to help new and vulnerable families have choices, quality programming, and outstanding information in child development and parenting.



Those recommendations will include at a minimum:



- A common referral process for families requesting home visitation programs;
- A core set of competencies and required training for all home visitation program staff;
- A core set of standards and outcomes for all programs, including requirements for a monitoring framework;
- Coordinated training for home visitation and early care providers, to the extent that training is currently provided, on cultural competency, mental health awareness and issues such as child trauma, poverty, literacy and language acquisition;
- Development of common outcomes;
- Shared reporting of outcomes, including information on any existing gaps in services, disaggregated by agency and program, which shall be reported annually, pursuant to section 11-4a of the general statutes, to the joint standing committees of the General Assembly having cognizance of matters relating to appropriations, human services and children;
- Home-based treatment options for parents of young children who are suffering from severe depression; and
- Intensive intervention services for children experiencing mental, emotional or behavioral health issues, including, but not limited to, relationship-focused intervention services for young children.



Cindy Heine
Associate Executive Director
Prichard Committee



Dustin Miller
Partner
Government Strategies, LLC

The Kentucky Experience

The Road to
Passing
Home
Visitation
Accountability
Legislation

Cindy Heine
Associate Executive Director,
Prichard Committee

Dustin Miller
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Strategies, LLC

HISTORY

2000 - KIDS NOW Initiatives

- Comprehensive Early Childhood Legislation
- Funded with 25% of Tobacco Settlement Funds
- Coordination of Programs
- HANDS (HV Program)
- STARS Quality Ratings
- Scholarships for Early Education Professionals
- Other programs aimed at health and social services

TWO FOCUSES

Primary Focus:

*Replacing declining Tobacco Funds in
Challenging Budget Times*

2013 Goal for Non-Budget Year Session:

*Accountability Legislation to set the stage for
future budget requests*

STRATEGIES

Build Coalition & Convert to Disciples

- Governor's Office
- HANDS Professionals
- Early care and education community
- Business Community

Be Strategic & Lay Groundwork

- Accountability Theme
- Educational Non-Voting Hearing
- Create Champions
- Select and secure a good sponsor
- Negotiate Bill Language

**Work bill
through
staff,
committee
chairs and
leadership**

PASS THE BILL!!!

**Unexpected twist with friends
in the House**

**Calling All
Contacts**

**24/7 attention
to bill status**

SAY THANKS

Bill Signing with Governor

Letters to Advocates & Legislators

Thanking the Sponsor

Videos to Legislators

Convert Goodwill to 2014 Goal - \$\$\$

HANDS VIDEO



Please visit:

<http://www.youtube.com/watch?v=46dkUVX-Gso>

THANK YOU!



Jesse Leinfelder
Manager
Federal Home Visiting Program, New Mexico

Pew Webinar



New Mexico's Home Visiting Accountability Act

September 10, 2013



Standards-Based Home Visiting System

- Acknowledges community-specific program development
- Promotes program development sensitive to culture, language and heritage
- Supports buy-in and ownership at all levels
- Forces the state to identify priorities, goals, beliefs, and commitments – to develop a system based on related research and best practice





Standards-Based Home Visiting

- Allows for:
 - Establishment of a clear vision and mission of the home visiting system as one system
 - Common language and philosophical/theoretical approach
 - Unifying infrastructure – e.g. common training & technical assistance system
 - Coming together and promoting a sense of belonging vs. isolation (especially in rural communities)
 - Common data system with common outcome and process measures as well as family and program information across all programs
 - Serving ALL children, not restricted by model



The NM Home Visiting Accountability Act

- Establishes the Children, Youth and Families Dept. (CYFD) as the lead agency for home visiting
- Defines the home visiting system in New Mexico
 - Clarifies which home-based services are and are not part of the home visiting system
 - Clarifies that home visiting is a prevention/promotion strategy (vs. intervention/clinical treatment services)
- Establishes a common framework for service delivery and accountability across all programs regardless of funding source
- Defines domains and outcomes of the system
 - CYFD is to establish objectives, indicators and measures for each outcome



The NM Home Visiting Accountability Act

- Requires collection, aggregation and analysis of data that is common to all programs
- Requires an Annual Report to governor, legislature, and Early Learning Advisory Council (ELAC)
- ELAC is to promote collaboration among public and private entities, the sharing of relevant data, and the alignment of home visiting as part of the early childhood system



New Mexico HV Logic Model Outcomes

5 Outcomes

- Children are born healthy
- Children are nurtured by their parents and caregivers
- Children are mentally & physically healthy and ready for school
- Children and families are safe
- Families are connected to formal and informal supports in their communities

Tracked with indicators

reflecting achievement of outcomes

- Screening tools
- Referrals-Disposition
- Data management system electronic case files



Home Visiting Standards

- Program participation
- Relationship-based practices
- Culturally-competent practices
- Family and child goal setting
- Program management
- Staff qualifications
- Curriculum and service delivery
- Community engagement
- all the above documented through
- Data management



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