

Today's Session

- Discuss workforce issues for evidence-based programs
- Discuss how these issues apply to programs implemented in tribal communities
- Discuss potential workforce opportunities and challenges and ways to address them

Today's Speakers

- Brandon Coffee-Borden, Mathematica Policy Research
- Delores Bigfoot, University of Oklahoma Health Sciences Center
- Nancy Dickinson, University of Maryland and National Child Welfare Workforce Institute
- Ranelda Hastings, Center for American Indian Health, John Hopkins University



Supporting Evidence-Based Home Visiting to Prevent Child Maltreatment

Recruitment, Retention, Training, Professional Development, and Supervision of Home Visiting Staff

Brandon Coffee-Borden
Mathematica Policy Research
January 19, 2011

Tribal Maternal, Infant, and Early Childhood Home Visiting
Program Grantee Kick-Off Meeting



Outline for Today's Presentation

- **Background on the EBHV grantee cluster**
- **Workforce requirements for evidenced-based programs**
- **EBHV grantees' experiences with recruiting, training, supervising, and supporting home visitors and lessons learned**

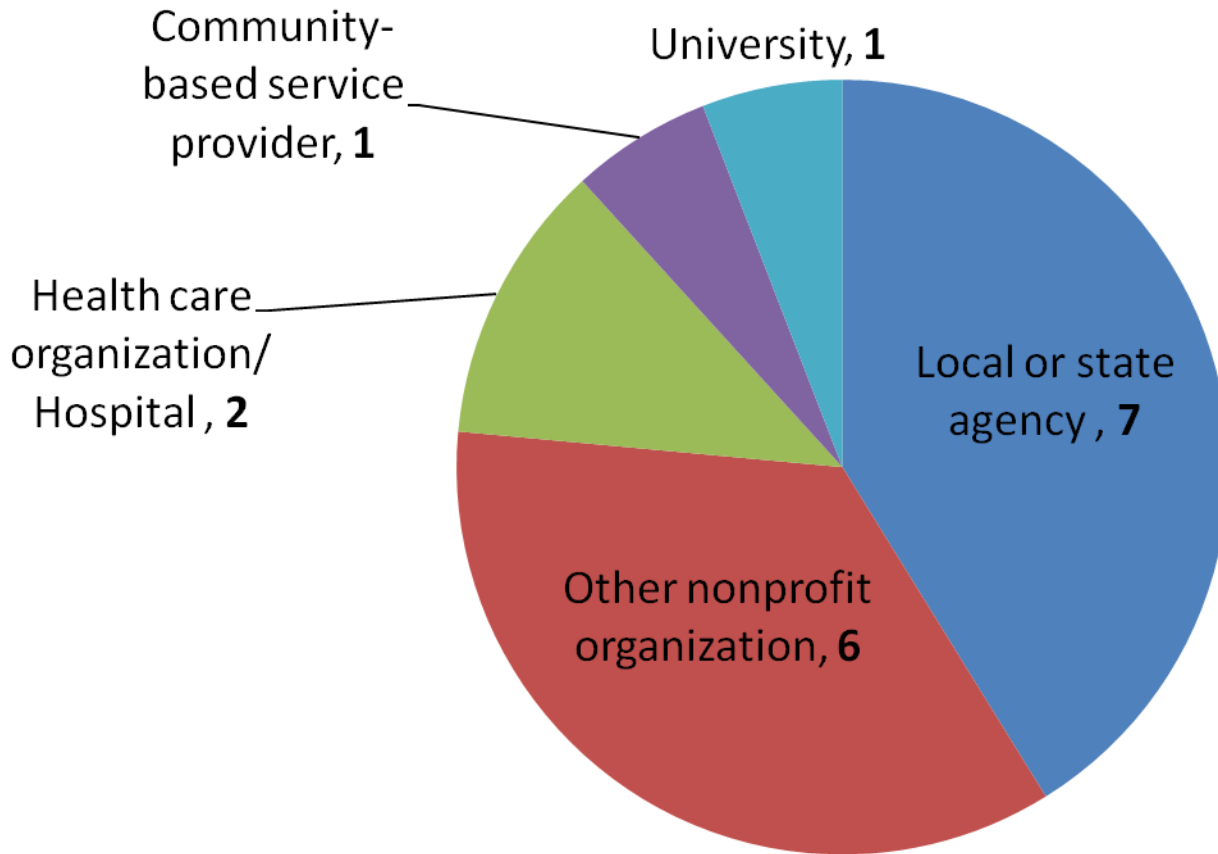


The Supporting EBHV Program

- **In 2008 ACF's Children's Bureau funded 17 grantees in 15 states to:**
 - Select evidence-based home visiting models
 - Build infrastructure to implement, scale up, and sustain programs with fidelity
 - Participate in local and cross-site evaluations
- **The grant period is 5 years**
- **Mathematica/Chapin Hall conducting the cross-site evaluation**



EBHV Grantees' Organizational Setting





Grantees Selected Several Home Visiting Models

Home Visiting Program Model	Target Population	Number of Grantees Selecting Model
Nurse-Family Partnership	First-time pregnant women < 28 weeks gestation	11
Healthy Families America	Pregnant women or new parents within two weeks of infant's birth	5
Parents as Teachers	Birth or prenatal to age 5	3
SafeCare	Birth to age 5	3
Triple P	Birth to age 12	1



Collecting the Data

- **Telephone interviews with grantee and implementing agency staff from 9 EBHV grantees**
 - Identifying and recruiting qualified home visitors
 - Pre-service and in-service training for home visitors and supervisors
 - Providing supervision and ongoing support to home visitors
 - Lessons learned about recruiting, training, supervising, and supporting home visitors in evidence-based programs



Requirements for Evidence-Based Home Visiting Programs

Recruitment	Training
<ul style="list-style-type: none">• Education requirements• Experience requirements• Recommended skills and characteristics	<ul style="list-style-type: none">• Mandatory pre-service training; travel required• Required in-service training



The Evidence-Based Difference

Service Delivery	Supervision and Support
<ul style="list-style-type: none">• Work intensively with families for an extended time period• Work independently while meeting critical program standards• Fulfill recordkeeping and reporting requirements	<ul style="list-style-type: none">• Few home visitors per supervisor• Group, one-on-one, and observation activities• Frequent and consistent• Constructive feedback• Supervision is supportive not directive• Fidelity monitoring



Searching for Home Visitor Candidates

- **Internal**
 - Identified staff and approached them about transferring to the new program
 - Posted the position internally, talked to other managers, and held informational meetings
- **External**
 - Used professional networks and spread information by word of mouth
 - Advertised through local media, online, and other community organizations



Interviewing Home Visitor Candidates

- **Interviewers stressed the implications of working in an evidence-based program:**
 - Need to travel for training
 - Intensive feedback, observation, and coaching
 - Reporting and data collection
 - Fidelity to the model
 - Model characteristics
- **Used scenarios, role-plays, and targeted questions to assess the candidates**



Pre-Service Training: Model

- **Intensive training provided by home visiting model, often off-site**
- **Home visitor response was positive but...**
 - Amount of information may be overwhelming
 - Nervousness about practicing in front of peers
 - Discomfort with unfamiliar practices or requirements
- **Informants recommended that supervisors attend pre-service training even if not required**



Pre-Service Training: Local

Provided in addition to training provided by model

- **Sample topics:**

- Motivational interviewing
- Safety
- Domestic violence
- Substance abuse
- Cultural competency
- Teenage mothers

- **Training providers:**

- Colleges and universities
- Other staff or programs within the agency
- Independent trainers or consultants
- Community partners



In-Service Training: Local

Fulfilled model requirements and provided professional development

- **Sample topics:**

- Local resources
- Child, maternal, and mental health
- Sexual abuse
- Trauma
- Postpartum depression

- **Training providers:**

- Colleges and universities
- Other staff or programs within the agency
- Independent trainers or consultants
- Community partners



Supervising Home Visitors

- **One-on-One**
 - Used home visit records as guide
 - Discussed home visitor specific issues
- **Group supervision**
 - Discussed service delivery challenges and successes
 - Planned for upcoming activities
 - Reviewed administrative issues, cases, and referrals
 - Provided education and training
 - Fostered collaboration and support among home visitors



Supervising Home Visitors

- **Observation**
 - Viewed, videotaped, or audio recorded visits
 - Assessed adherence to model and interaction with families
 - Used results during one-on-one supervision
 - Asked home visitors to assess themselves using video or audio recording
 - Increased frequency for struggling home visitors



Challenges

- **Recruitment**
 - Finding bilingual and culturally competent home visitors
 - Salary competition
 - Judging if candidates were a “good fit”
- **Training**
 - Cost of training
 - Balancing training and other responsibilities
 - Scheduling training



Challenges

- **Supervision**
 - Communicating with home visitors when they are out in the field
 - Finding time to meet with growing caseloads and commitments
 - Balancing guidance with respecting home visitor autonomy



Lessons Learned: Recruitment and Training

- **Recruitment**

- Candidates must understand the home visitor role
- Cultural competence may need to take precedence
- Recruitment takes time

- **Training**

- Mastering evidence-based home visiting takes time
- Even experienced home visitors need time to learn
- The training process is demanding
- Training on the community and target population complements training in the home visiting model



Lesson Learned: Supervision

- **Supervision in evidence-based home visiting is critical to success**
 - Provides support
 - Alleviates frustration and stress
 - Provides oversight
 - Focuses on fidelity
 - Promotes record keeping and form completion
 - Opportunity for modeling and education
- **Supervisor unites and strengthens the group**
- **May require an organizational culture shift**



Acknowledgements

- **Sponsoring agency: the Children’s Bureau (CB) within the Administration for Children and Families, U.S. Department of Health and Human Services**
- **Federal project officer: Melissa Lim Brodowski**
- **My colleagues on the work underlying this presentation:**
 - Kim Boller, Debra Strong, Diane Paulsell, Patricia Del Grosso, Heather Zaveri, Heather Koball, Russ Cole, and others at Mathematica
 - Deborah Daro, Chapin Hall at the University of Chicago



For more information

- **Read the briefs:**
 - Recruiting and Training Home Visitors for Evidence-Based Home Visiting (EBHV): Experiences of EBHV Grantees
 - Supporting Home Visitors in Evidence-Based Programs: Experiences of EBHV Grantees
 - <http://www.supportingebhv.org/crossite>
- **Contact:**
 - Brandon Coffee-Borden, bcoffee-borden@mathematica-mpr.com