

**Home Visiting Task Force Meeting
November 3rd, 2015**

MINUTES

Participants: Gaylord Gieseke (co-chair), Anna Potere, Heather Blankenship, Kathy Stohr, Paula Corrigan-Halpern, Dawn Delgado, Gail Nourse, Teresa Kelly, Lesley Schwartz, Jay Young, Merri Ex, Deborah Hagman-Shannon, Ruth Ayukesong, Roy Harley, Whitney Walsh, Dan Harris, Tiffany Burkhardt, Melanie Garrett, Elaine Duensing, Diane Scruggs, Colleen Jones, Isolda Davila, Kennye Westbrook, Stacey McKeever, Christine Nicpon, Lisa Masinter, Theresa Hawley, Lynn Burgett, Donna Emmons, Denise Dell'Isola, Gerri Clark, Julia Zhu, Audrey Moy, Andrea Palmer, Penny Smith, Kim Zalent, Mendy Smith, Cindy Zumwalt, Nancie Brown, April Ingram, Kelly Woodlock, Janelle Weldin-Frisch, Loretta Barriffe, Joanna Su, Claire Dunham, Beth Mascitti-Miller

Welcome and Introductions

- July 20th meeting minutes: the minutes were approved with no changes.

Home Visitor Safety Survey and Recommendations

- CPRD conducts an annual survey of all MIECHV home visiting staff, supervisors, and CSD and CI staff. This past year, CPRD added a section of questions about safety to the survey.
- Overall, the results of the survey indicate that there is a high amount of concern about safety among home visitors. Most concerns were related to the neighborhood environment, such as driving and walking, versus safety issues in the home. Newer staff were more likely to feel intimidated.
- The most common risk reduction strategies at the provider level are:
 - Home visitors are prepared, e.g. keeping cell phones charged and programming emergency numbers in their phones.
 - Home visitors remain alert, e.g. identifying exits in a home and trusting their instincts.
 - Home visitors manage their environment, e.g. conducting visits during daylight hours.
- At the program level, risk reduction strategies include holding trainings, encouraging use of the “buddy” system during home visits, and allowing home visitors to leave or cancel a visit at any time for any reason.
- Safety concerns do not impact only home visitors, but also other providers who work in the home environment, such as DCFS caseworkers and early interventionists.
- One of the challenges that safety risks presents is maintaining completion rates in dangerous situations. One way to mitigate this would be for funders to provide agencies with some discretion in grants and contracts for a certain number of incomplete visits due to safety concerns and experiences.
- The home visitor-parent relationship is reciprocal, and perhaps parents could become involved in helping home visitors to reduce safety risks.
- Next steps:
 - The HVTF will form an ad hoc work group to focus on this issue.
 - CPRD and OECD will develop best practice resources for home visitors, supervisors, and agencies, which they will present to the HVTF Executive Committee for review. Once they are finalized, they will be disseminated.

Budget Advocacy Efforts

- An email was distributed to the full Home Visiting Task Force membership providing information to members on how they can support home visiting through advocacy efforts, especially for the Healthy Families and Parents Too Soon budget lines in the Department of Human Services.
- This information includes a fact sheet on the importance of home visiting in Illinois, a link to letter that people can send to their legislators, and a survey to share the impacts of the budget impasse on programs and the families that they serve. This was done in partnership with the Healthy Families Policy and Advocacy Committee.
- It is important for businesses and corporate boards to be engaged in advocacy. Children's Home + Aid is conducting a survey of board members to gauge interest in doing this.
- The ISBE budget hearings represent an opportunity to discuss the impact of the changes to the CCAP program on ISBE's infrastructure. There may be other hearings where there are opportunities to discuss the importance of home visiting funding.
- The HVTF Executive Committee will continue to discuss this topic and to determine opportunities to work together.

Work Group Updates

- Universal Newborn Support System
 - The goal of the group is to develop recommendations for creating a universal system in Illinois to reach all newborns and their parents and offer them a home visit to provide them with information, supports, and resources to strengthen the capacity of parents to meet their children's needs.
 - The Illinois Hospital Association issued a survey to hospitals across the state to identify which hospitals may already be conducting a similar program or might be interested in participating in a pilot project.
 - The group is now working to identify potential pilot communities, to develop a public relations/marketing campaign, and to engage hospitals, community providers, and private health insurance. The group's next meeting is on December 10th, which will feature a discussion with representatives from Durham Connects on their universal model.
- Home Visiting-Child Welfare
 - The goal of the pilot program is to prevent children of pregnant and parenting teen wards of the state from entering the child welfare system by connecting them with home visiting services.
 - The focus of the pilot will be on programs implementing the Healthy Families America (HFA) model. Representatives from the national HFA are excited about this pilot and have agreed to extend eligibility for children up to the age of 1.
 - The group is developing a concept paper that will be presented to the HVTF Executive Committee for review so that the work can continue in 2016.

MIECHV Updates

- HRSA's Information Collection Request: HRSA has opened a public comment period on its proposed revised MIECHV benchmark constructs, which are due November 9th, 2015. ASTHVI, the Ounce of Prevention Fund, and the Home Visiting Task Force Executive Committee will submit comments.
- Pew Home Visiting Data for Performance Initiative: Pew is finalizing recommendations for data metrics that all states should collect.
- Future Reauthorization

- Congress passed a two-year extension of the MIECHV program at level funding of \$400 million per year, which sustains the program through September 2017. There is already discussion about extending MIECHV beyond September 2017. Specifically, ASTHVI has convened a subcommittee on reauthorization. This may not be another “straight” reauthorization because the House Ways and Means Committee has taken over legislative oversight of MIECHV from the Energy and Commerce Committee, and this committee may want to propose changes to how MIECHV is designed and implemented.
- Teresa Kelly and Anna Potere are participating in the subcommittee and will keep the HVTF apprised of any updates or opportunities for the Task Force to support reauthorization.

Wrap Up and Next Steps

- The next full meeting of the Task Force is scheduled for January 27th, 2016. The full meeting schedule for 2016 has been distributed.