



First 5 Association's Home Visiting Policy Framework

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FIRST  **5**
ASSOCIATION OF CALIFORNIA



INTRODUCTION

Home visiting is a critical lever to increase positive outcomes for children during the prenatal to three timeframe; it connects families to a holistic range of systems and services; and it is a strength-based approach that can support families during their most vulnerable times and mitigate trauma. First 5s brought home visiting to California, and have been powerful builders of home visiting systems across the state for over 20 years.

Now is a moment to expand California's home visiting infrastructure, when families are experiencing high levels of stress, current programs are not being maximized, and the field of home visiting is changing as a result of the pandemic and new investments in home visiting. The First 5 network envisions a comprehensive home visiting strategy to ensure families — particularly those who have experienced structural racism, toxic stress and generational poverty — have access to appropriate and effective family strengthening services, while maximizing cross-sector connections and available funding streams, including pursuing a home visiting Medi-Cal benefit.¹

This policy framework captures First 5s' fundamental beliefs and goals for home visiting. It is intended to inform the First 5 Association's home visiting advocacy and systems building efforts over the next several years.

¹ This language is drawn from the First 5 Association's 2022-2025 Strategic Plan.

PROCESS

This policy framework is the product of a First 5 Association home visiting think tank process. Over the course of six months, the Association convened ten members of the First 5 network, representing a wide range of First 5s' diversity, including a range of county sizes and regions and First 5 California; First 5 investments spanning various home visiting models and approaches; and racial/ethnic diversity of staff. The process was informed by extensive national and California research about home visiting services, with an explicit focus on issues of race, equity, diversity and inclusion (REDI). Throughout the think tank process, First 5 county commissions provided input and guidance through a variety of member convenings, including Policy Committee, First 5 Executive Director and Board of Director meetings.

The result is eight principles grounded in three goals that capture First 5s' beliefs and vision for home visiting in California: Create equitable and family-centered services; Build a coordinated and integrated system; and Invest in ongoing continuous quality improvement. The goals and principles are listed below, along with additional contextual information that describe the foundational concepts and intent of each principle.



GOAL 1:

Create Equitable and Family-Centered Services

Principle 1: Every family deserves access to voluntary home visiting and supports from the prenatal period to the first years of their child's life that facilitates local access to additional resources.

A universal approach to offering home visiting services will reduce the stigma associated with seeking and receiving support, and will substantially increase access to early intervention services for children, prenatal to age 3. Because home visiting is a relationship-based service that every family deserves, home visiting is well-positioned to connect families to these additional services. This principle also recognizes that home visiting may not be a solution for all families; other solutions exist within communities that provide important resources for families.

Principle 2: The duration, intensity, modality, and delivery of voluntary home visiting should respond to family-defined assets and goals, and be informed by evidence of community impact.

First 5s believe in the strength of families. Home visiting services should build on those strengths. Systems and providers should make home visiting model choices transparent and support families so that they may choose services that best meet their needs. Because home visiting serves families at a vulnerable time in a personal setting, services must be culturally responsive and appropriate. To offer a wide range of models that are culturally responsive and appropriate, First 5 leaders recognize the value and evidence of impact of locally-evaluated models.

Principle 3: Home visiting services should embody inclusive, strength-based and family-centered practices that help to mitigate the marginalization, historic racism, and systemic trauma that many families experience.

Home visiting should be strength-based and respectful of family interests and desires. Culturally-responsive, strength-based home visiting is one strategy to heal damage done to communities of color, as part of a broader community-responsive equity framework. System investments should be explicitly anti-racist to combat the effects of historic and current systemic racism.

GOAL 3:

Invest in Ongoing Continuous Quality Improvement



Principle 7: Home visiting program and policy decisions should be grounded in ongoing continuous quality improvement, informed by multiple qualitative and quantitative data sources, the perspectives of families and home visitors, and a commitment to Race, Equity, Diversity and Inclusion (REDI).

All family-serving systems should be focused on continuous quality improvement. These efforts benefit from data about the families who are able to access services. Data infrastructure is needed to allow state and county systems leaders to support quality improvement efforts and understand system barriers and gaps. Systems leaders should use data collection strategies that are REDI-informed, provide data by subpopulation, and are informed by the people closest to the services — parents and home visitors.

Principle 8: Workforce investments should include professional development, staff wellness, and compensation to recruit, advance, retain, and build a pipeline for a highly-effective and diverse workforce reflective of the population served.

Investments in the workforce are fundamental to achieving intended outcomes, and will require investments in both local and statewide capacity and infrastructure. Professional development activities should be broad based, including trauma-informed practices and family engagement. First 5s support the competitive compensation of the home visitor workforce, with a wage and benefits package that allows home visitors to realize a healthy standard of living. Workforce development efforts should intentionally build a pipeline of home visitors that is diverse and reflective of California's families.

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