



2021

Annual Report

The District of Columbia
Home Visiting Council

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INTRODUCTION

2021 demonstrated how home visiting services have been a real stabilizing force for many families with young children. For two long years, the District's home visiting programs have quietly shown up for families in immeasurable ways during the COVID-19 pandemic. While home visitors continue to use their training to center the growth of the family and their children's development, they have been able to walk them through relief resources and coping strategies to stay afloat during a uniquely challenging time. As families continue to navigate this uncharted territory, participating families know they have a trusted family support worker or home visitor in their corner to support them in their parenting journey.

The DC Home Visiting Council hosted town halls and regularly convened our membership throughout 2021 to support programs through these pandemic-related challenges and work collaboratively on various subcommittee projects to strengthen the District's overall early childhood system.

This 2021 Annual Report documents the work of the Home Visiting Council and the incredible impact of our member programs on families with young children in DC. Midway through the document are stories from home visitors and family participants to illuminate the large scale and everyday ways home visiting services have changed lives.

This year reminded us about several realities about the early childhood field: home visiting programs are truly a lifeline for the families that need an extra hand the most, and that home visitors are a resilient, inspirational, and crucial part of the early childhood workforce. This annual report outlines these realities and also highlights the many ways the DC home visiting landscape adapted and supported families this past year.



ABOUT US

The DC Home Visiting Council is a coalition of home visiting providers, local District agency representatives, child advocacy organizations, early childhood partners, and stakeholders. Since 2016, DC Action has chaired the Home Visiting Council and provided a staff coordinator.

The Home Visiting Council works to strengthen home visiting as a strategy to support positive child and family outcomes in the District of Columbia. By addressing the systemic needs of DC home visiting programs, their staff, and the families they support, the Home Visiting Council is committed to supporting home visiting programs to provide families with the resources, access, information, and autonomy to navigate DC's early childhood system and the services they need to flourish in their communities.

The 2021 Home Visiting Annual Report contains an overview of the District's home visiting programs, key data points, and voices from the families served through these programs. We are also pleased to share a summary of the Home Visiting Council's year in review and our progress toward strengthening the District's home visiting system.

Ruqiyah Anbar-Shaheen,
Home Visiting Council Chair

Nisa Hussain,
Home Visiting Council Coordinator

MEMBERSHIP

The following organizations participated as members of the HV Council in 2021:

AmeriHealth Caritas District of Columbia

Bainum Family Foundation

Bright Beginnings

CentroNía

Children's National Hospital

Children's Law Center

Community Family Life Services

Community of Hope

Council for Professional Recognition

DC Action

DC Affiliate of the National Association
for the Education of Young Children

DC Child and Family Services Agency

DC Department of Behavioral Health

DC Department of Health

DC Department of Health Care Finance

DC Fiscal Policy Institute

Generation Hope

Georgetown University Center for Child
and Human Development

Healthy Babies Project Inc.

Howard and Geraldine Polinger Family
Foundation

HSC Home Care

Mamatoto Village

Martha's Table

Mary's Center

Office of the State Superintendent of
Education

Parents as Teachers National Center

Rosemount Center

SPACEs In Action

The Family Place

Trusted Health Plans

United Planning Organization

Washington Area Women's Foundation

HOME VISITING COUNCIL OVERVIEW



VISION

All families in the District of Columbia have full access to responsive systems that facilitate quality education, safety and stability, and the resources they need to flourish in their communities.



MISSION

The Home Visiting Council convenes, mobilizes, and informs DC families and early childhood stakeholders to strengthen home visiting to support the needs and outcomes of families with expectant parents or young children.



THEORY OF CHANGE STATEMENT

Expectant parents and families with young children across the District have the strong will to care for their children and support their development. Yet all families need extra support during this strenuous period to parent and prosper in a safe and secure environment. Some families are also further burdened by external factors such as economic and racial injustices.

Home visiting supports families to have healthy babies and young children who receive the care they need to meet their highest potential, and guides parents and caretakers to address their own challenges so that they are better able to meet their goals and do the important work of caring for their young children.

In partnership with parents and families, home visiting uses evidence-based strategies to improve parent-child attachment, child school readiness, health

care utilization, family health outcomes, address challenges that affect parenting capacity, identify and support children with developmental concerns, and reduce child abuse and neglect.

The Home Visiting Council is committed to supporting home visiting programs to provide families with the resources, access, information, and autonomy to navigate DC's early childhood system and the services they need to flourish in their communities by addressing the systemic needs of DC home visiting programs, their staff, and the families they support.

The Home Visiting Council convenes maternal and early childhood stakeholders to develop programmatic support for home visiting programs, identify and advocate for systems improvements and sustainable investment in home visiting, lead the development of quality referral pathways to home visiting, and disseminate home visiting data.



VALUES

- We believe in a strengths-based approach that honors the knowledge and skills of communities we work alongside.
- We will direct the knowledge and skills of home visiting programs and Home Visiting Council to inform systems change that eases the burdens on families navigating institutional barriers such as sexism, discrimination, capitalism, racism, etc., and their intersections.
- We commit to developing a home visiting workforce that is well-supported, fairly compensated, and reflects the communities we work alongside.
- We commit to support home visiting programs in being accessible; in language, location, ability, and more.
- We commit to a continuous effort of reconciliation and accountability, by addressing the traumatic experiences that health care, nonprofits, advocates, and governmental services have inflicted on certain communities.
- We commit to developing ethical standards of engagement with partners and funders in both success and dilemma.

UNDERSTANDING HOME VISITING IN THE DISTRICT

Home visiting is an evidence-based strategy that supports the healthy development and well-being of children, expectant parents, and families.

The service connects families with a trained professional who guides caregivers with resources, skills, and general support to reach certain outcomes including improved perinatal and postnatal health, healthy child development, and positive parenting practices. Whether a parent wants reliable information to prepare for a new pregnancy or a family seeks guidance around caring for a child with complex needs, there is typically a home visiting program that can center the family's needs and provide that individual support.

In DC, home visiting programs primarily use the following national models to drive the curriculum and pursue specific outcomes:

- Parents as Teachers (PAT)
- Healthy Families America (HFA)
- Home Instruction for Parents of Preschooler Youngsters (HIPPO)
- Early Head Start (EHS)

Three programs have also developed their own models or use a hybrid of models.

Due to this diversity in model, curriculum, and focus of each program, the Home Visiting Council decided to create an overarching definition of home visiting to ensure a shared understanding of home visiting as a whole.

In 2019, the Home Visiting Council approved a District-specific definition for home visiting. The Home Visiting Council convened its membership, including local agency representatives from DC Health, the DC Department of Behavioral Health, DC's Child and Family Services Agency (CFSA), DC's Office of the State Superintendent of Education (OSSE); managed care organizations; home visiting providers; and early childhood advocates to participate in the development process. After discussing a shared understanding of the service's goals and strengths, reviewing national and state examples, and analyzing the elements of home visiting models, the Home Visiting Council voted upon the following definition:

DC HOME VISITING COUNCIL DEFINITION

Home visiting is a service delivery strategy that serves as a prevention and early intervention support for expecting parents and families of young children from before birth until kindergarten entry. In these voluntary programs, trained home visitors and participants regularly meet in the home or another comfortable setting designated by the family.

A key characteristic of these programs is that each implements a model for addressing specific maternal, family, and child outcomes through education, counseling, coaching, and other services. Home visitors also provide families with connections to community-based services and resources relevant to their goals. Home visiting programs must meet all of the following criteria:

- Visits are home-based, meaning that more than half of the visits should be at the family's home or in another setting designated by the family, according to model design.
- Home visits occur according to a program model or curriculum, with flexibility to address the goals and needs of participants.
- The age range of children in participant families falls in the prenatal period up to approximately kindergarten entry, although not all programs serve the entire age range.
- Participation is voluntary.
- Models must target improvement in one or more of the following issues:
 - Child and family safety
 - Pregnancy outcomes
 - Timing of subsequent births
 - Maternal or child health
 - Parenting skills and practices
 - School readiness
 - Social, emotional, and cognitive development of children
 - Parental education, employment, and other parental factors linked to child development



IMPACT OF HOME VISITING



The broad impact of home visiting services extend to the child, the family, and the entire community. This two-generation approach focuses on both the child and the caregiver and how to holistically address markers of health, well-being, and independence.

Because of its customized approach to a family's needs, home visiting enables families to expand their skills and capacity to care for their growing families on their own, and also navigate the barriers that are often created by racist and discriminatory policies. These include barriers to safe housing and communities, good health, financial stability, and their resulting impact on parent-child attachment, parental mental health, and healthy child development. Families work hard to provide their children with the best possible childhood and home visitors support parents in accessing the resources they need to navigate these barriers and reach their goals.

Beyond this important impact on the community, home visiting supports families

during an extremely critical time. The services help parents nurture a healthy pregnancy and a stable environment for the child's first five years of life, which are crucial for a child's brain connections and cognitive, emotional, and physical development. These programs also address the adverse childhood experiences (ACEs) of parents such as child abuse, neglect, or trauma, and work to minimize or prevent the damaging effects they have on the child's growth. This type of preventative public health approach supports family and community strengthening .

Home visiting alone may not resolve every challenge that families face, but it is an effective strategy within the broader system of services for families. In DC, home visiting plays an integral role within the District's early childhood system by filling in the gaps of services, connecting various systems, and providing that individualized, close-knit support that many programs and medical encounters cannot offer the way home visitors can.

STORIES



While the quantitative impact of home visiting has been documented, to best understand the depth of the impact of home visiting, it is necessary to hear from families about their experiences with these programs. When parents and caregivers tell their own stories, they share how home visiting has changed their lives, naming increased confidence in their parenting abilities and feelings of independence as the result of the trusted relationships families have with their home visitors. Several DC families and home visitors shared

“I have been in the program for over four years. There are three benefits that I have experienced. One is being in the program and learning from it, so I have the knowledge to guide my daughter at the different stages of her life. Two, the program gives me tools with activities that we do to meet the goals we want for her development or for the stage that my daughter is at. Three, the in-depth knowledge I acquire helps me to be able to learn more about each stage in her life.”

- Zulma, family participant

“I am a proud father of three children. I wanted to express my satisfaction with the program for the great help to my development as a parent as well as for the great knowledge I have acquired through this program. I have not only grown as a father but also as a person and as a member of society. I feel supported since the material that the staff provides creates a remarkable impact on the fatherhood community. On a personal level, my attitude and skills have changed in a positive way in my day-to-day life as a father. ”

- Roberto P, family participant

“When we engage in home visiting programs, we don't change the lives of one family, we strengthen and make our community and city a better place.”

- Jazmine, home visitor and manager

STORIES



“My greatest reward as a home visitor is teaching and equipping parents with communication skills and strategies that are transformational to them, their families, and children.”

-Bridget, home visitor and manager

“In a clinic visit, you only have 15 minutes to interact with all of the staff who are there to serve you. A home visiting visit is with one committed, consistent individual who you’ve developed rapport with. You have that opportunity to sit with them to develop a relationship and to ask questions.”

-Katie, home visitor manager

“[The program] has taught me a lot! Because at this age that I am, to be a mom has been very difficult for me. And it has been a great support for me and teaches me many things about my baby as she grows, step by step. It’s something that helps me a lot because that’s how I can get to know my little girl more.”

-Amy, home visiting participant

COVID-19 AND HOME VISITING



Since the start of the COVID-19 pandemic, families in the District persevered through unprecedented challenges, including negative financial, physical, and emotional consequences due to the pandemic's impact. For some families, the pandemic amplified existing stressors, such as financial instability and food insecurity.

As a result, home visiting programs rallied to provide families with an extra layer of support during this difficult time. Notable among these challenges was a shift in approach: in-person home visits have always been the keystone of this service, so shifting to safer, virtual visits was a significant, needed, and challenging transition to effectively support participants.

Fortunately, the District's home visiting workforce quickly adapted to new safety guidelines and the changing priorities of their families, and continued to listen to families' input about

how to best meet their needs. While 2021 felt more hopeful for industries to find their footing and adjust to primarily virtual operations than the previous year, both programs and families still faced fluctuating comfort levels around safety, moments of hope around vaccines, and constant feelings of uncertainty. Ultimately, DC home visiting programs continued to evolve with the changes and remained a lifeline to families dealing with the stressors of the lockdown and beyond in 2021.

Home visitors have always helped families cope with stressors and empowered them to make decisions independently for their children, so this workforce was uniquely positioned to aid families during this pandemic and recovery.

Main themes around the District's home visiting programs' adaptations, challenges, and needs are highlighted below.



HOME VISITING PROGRAMS:

- 100% of programs have offered virtual visits since the start of the pandemic.
- 55% of home visiting programs experienced a decrease in enrollment, due to difficulty recruiting families virtually and shifting priorities for families to focus on fulfilling their basic needs first.
- Programs reported a general struggle to maintain consistent engagement and active participation from families, due to competing priorities. Many families were focused on seeking basic needs and stretching their limited time to care for family members and their children. Home visitors observed less of an urgency for families to complete a full home visit and its curriculum.
- The majority of programs experienced frequent challenges teaching families how to navigate virtual visits. Home visitors noted a lack of technology (both WiFi and equipment) and varying levels of experience using virtual meeting platforms across families.



HOME VISITING FAMILIES:

- Programs reported an increase in basic needs like rent assistance, supplies, food. For some programs, this rise stemmed from job losses in the families they worked with.
- 55% of home visiting families experienced an increased need for mental health and domestic abuse resources
- Home visitors noted the lack of privacy that families felt while engaging during virtual visits. Many families struggled to find a place in their home to be focused and alone during these conversations.
- 87% of programs observed challenges around their participants' experience with, confidence in, and access to technology (including consistent wifi). The learning curve for families to adjust to virtual video platforms and resolve digital challenges was common across programs.

DC HOME VISITING PROGRAMS

In fiscal year 2021, 13 organizations implemented 17 home visiting programs in the District. “In total, these programs had the capacity to serve approximately 1437 children and families and served 1133 families in 2021.¹

Fifteen of these programs were publicly funded, including eight programs receiving direct federal funding and nine receiving local funding or locally administered federal funding. These programs are detailed in Figure 1.

Figure 1: DC Home Visiting Programs in FY 21*

Organization	Program	Model/ Curriculum	Target Population	Capacity	Funding Sources
Bright Beginnings Inc.	Home-Based Program	Parents as Teachers	Families, pregnant individuals, and children under age 3 experiencing homelessness	64 families at a time	Federal (Head Start), and private
CentroNía	Early Head Start	Early Head Start	Bilingual and Spanish-speaking families with low incomes; pregnant women and families with children under age three; families experiencing homelessness with children under three	72 families at a time	Federal (Head Start), and private
Community Family Life Services	Parent Education and Home Visitation Program	Nurturing Parenting	Returning citizens reunified or seeking to reunify with their children; Parents experiencing homelessness or domestic violence	125 families annually	Local (CFSA)
Community of Hope	Healthy Families America Program	Healthy Families America	Pregnant individuals who live in Wards 7 and 8 or families experiencing homelessness with children under age 3	40 families at a time	Private
	Parents as Teachers Program	Parents as Teachers	Pregnant individuals who live in Wards 5, 7 and 8, or families experiencing homelessness with children under age 3	40 families at a time	Local (DC Health)

1. Home visiting capacity and enrollment tracking differs across programs, with some programs counting the total number of families (regardless of number of children) they have the capacity to enroll and others counting the total number of children (regardless of how many of them come from the same families). Because this is not consistent across programs, this total represents a combined count of both slots for children and slots for families

The Family Place	HIPPY Home Visiting	Home Instruction for the Parents of Preschool Youngsters (HIPPY)	Spanish-speaking and immigrant families with low incomes with children aged zero to six	50 families at a time	Federal (Community-Based Child Abuse Prevention grant)
Generation Hope	Next Generation Academy	Parents as Teachers	Student parents and their children from age zero to six	30 families annually	Private
Georgetown University Center for Child and Human Development	Parenting Support Program	Parents as Teachers, Health and Wellness Curriculum	Parents with intellectual and developmental disabilities	40 families at a time	Local (DC Health)
Healthy Babies Project Inc.	Healthy Babies Project Home Visiting Program	Healthy Families America	Parenting youth with low incomes (young families under the age of 21 in the district) with children under 3 months	52 children at a time	Local (UPO's Federal Funding), and private
Mamatoto Village	Mothers Rising	Mothers Rising Model	Primarily Black, medicaid-eligible women and individuals living in the District and Maryland	300 families annually	Local (DC Health) and private
Martha's Table	Family Visiting	Early Head Start, Parents as Teachers	Families in Ward 7 and 8, as well as families in Wards 1-6 that may be deemed homeless	33 children at a time	Federal (Head Start)

Mary's Center	Nurse Family Partnership of DC	Nurse Family Partnership	First-time mothers with low incomes beginning before their 28th week of pregnancy	100 families at a time	Local (DC Health) and private
	Healthy Families America Program	Healthy Families America	Pregnant and postpartum families who are residents of DC and identified as high social and/or medical risk	120 families at a time	Federal (MIECHV), local (DC Health), and private
	Parents as Teachers Program	Parents as Teachers	Families throughout Washington DC with children under 5 years old, including pregnant and expecting caregivers	160 families at a time	Federal (MIECHV and Family First Prevention Services Act), Local (CFSA, DC Health)
	Father-Child Attachment Program	Parents as Teachers, 24/7 Dad®	Any caregiving masculine figure with a child under 5 years of age with no open CFSA cases	50 families at a time	Local (CFSA)
Rosemount Center	Home-Based Program	Parents as Teachers	Families with lower incomes with children under the age of three, including pregnant women and/or families who are experiencing homelessness	77 families at a time	Federal (Head Start) and private
United Planning Organization	Early Head Start, Home-Based Program	Early Head Start, Parents as Teachers	Teen parents and expecting families, including families experiencing homelessness, immigrant families, families of children with special needs, and families with low incomes	84 families at a time	Federal (Early Head Start)

*This table includes all home visiting programs in DC. The Perry School provided home visiting services in 2020 but the Home Visiting Council was unable to confirm details.

PUBLIC FUNDING AND SUSTAINABILITY



LOCAL PUBLIC FUNDING

Child and Family Services Agency (CFSA)

The Child and Family Services Agency used \$470,000 in local dollars to fund two home visiting programs in 2021, and to support DC Health's implementation of one program. CFSA funds home visiting as part of the agency's child abuse and neglect prevention approach.

The two programs funded directly by CFSA include Mary's Center's Father-Child Attachment program and Community Family Life Services' Parent Education and Home Visitation Program. The Father-Child Attachment program, which focuses on fathers and masculine caregivers, received \$150,000 in one-time funding in FY21. The Parent Education and Home Visitation program, which focuses on returning citizens and parents reunifying or seeking to reunify

with their children, received \$160,000 in one-time funding in FY21.

CFSA continued its partnership with DC Health by funding home visiting services for pregnant and parenting youth in foster care, aging out of care, or known to CFSA. This transfer of \$160,000 to DC Health is part of an expansion of Mary's Center's Parents as Teachers program. These funds are a component of DC's implementation of the District's five-year prevention plan: [Putting Families First in DC](#) as part of the [Family First Prevention Services Act \(FFPSA\)](#).

CFSA's total investment in home visiting was \$470,000 in FY2021.

DC Department of Health (DC Health)

DC Health aims to ensure that all children and families have access to a continuum of comprehensive, high-quality early childhood programs and services that promote child well-being and school readiness and ensure that all children are healthy, ready to learn and have safe passage through the early years.

DC Health used local funding to support five home visiting programs in 2021, in addition to federal Maternal Infant and Early Childhood Home Visiting funding described below. These programs include Community of Hope's Parents as Teachers program, Mary's Center's Nurse Family Partnership and Healthy Families America programs, Georgetown University's Parenting Support Program, and Mamatoto Village's Mothers Rising program.

Three of these five programs are funded as part of the Birth-to-Three for All DC law. One is a new addition: Home Visiting for First-

Time Mothers, which was added to The Birth-to-Three for All DC legislation in the FY22 budget. This Nurse-Family Partnership program focuses on first-time mothers with low incomes beginning before their 28th week of pregnancy. DC Council renewed the previously cut funds in the FY21 budget and Mary's Center launched the new program in mid-2021.

DC Health's total investment in home visiting programs was \$2,470,477 in FY2021.

DC Health continued its strong partnership with the Home Visiting Council to develop a coordinated, centralized intake system for home visiting and refined the pre-pilot referral process through the Help Me Grow DC program at the end of 2021. After an evaluation of the pre-pilot's successes and challenges, the agency anticipates an official pilot of the referral process in 2022.

FEDERAL FUNDING

Maternal Infant and Early Childhood Home Visiting (MIECHV)

The federal [MIECHV](#) program funds states and territories to develop and implement evidence-based home visiting programs that best meet the needs of their communities. DC Health continued to oversee the MIECHV program in 2021.

MIECHV has supported home visiting programs in the District through grants to DC Health since 2010. Administered by the Health Resources and Services Administration (HRSA) in partnership with the Administration for Children and Families (ACF), this program has greatly impacted DC's home

visiting infrastructure. In FY21, DC Health received \$1.6 million in MIECHV funding. This funding supports home visiting services and implementation evaluation, as required by MIECHV.

In 2020, DC Health also received \$200,000 in MIECHV funding to support Georgetown University's Center for Child and Health Development in conducting a needs assessment, as required by MIECHV reauthorization. The [findings](#) of the needs assessment in 2020 were released in early 2021.

Family First Prevention Services Act (Family First)

The federal Family First Prevention Services Act ([Family First](#)) focuses on reforms to ensure children can stay safely with their families to avoid entering the foster care system. Through this law, CFSA invested additional federal dollars into services for families at risk of entering the child welfare system. The District approved the amended [DC Title IV-E Prevention Program Five-Year Plan: Putting Families First in DC](#) in 2020. This plan mapped out an approach to implement evidence-based programs to prevent children from being unnecessarily

removed from their homes and placed into foster care. Home visiting was named as one of the evidence-based strategies in this plan. Home visiting models with strong evidence behind preventing child abuse and neglect, such as Parents as Teachers, Healthy Families America, and Nurse Family Partnership, were recognized as particularly promising strategies to strengthen families and reduce risks to children. CFSA currently uses Family First dollars to fund its Parents as Teachers program in partnership with DC Health.

Early Head Start Home-Based

Five organizations and programs in the District were funded by the Federal Administration of Children and Families' Office of Head Start to implement Early Head Start - Home Based. These programs served 285 families in 2021.



WORK OF THE DC HOME VISITING COUNCIL IN 2021



The Home Visiting Council's primary aim is to improve family and child outcomes through a stronger home visiting system in DC. This work is carried out by its diverse membership and active subcommittees. In 2021, the Home Visiting Council kicked off the first year of its three-year strategic plan for 2021-2023. The goals of the Home Visiting Council are to:

1. Promote well-trained and well-supported home visitors
2. Promote home visiting as a family strengthening strategy within the District
3. Increase capacity of the home visiting system to deliver quality home visiting services
4. Ensure development and implementation of a coordinated intake and referral system for home visiting
5. Use data to understand, support, and demonstrate the impact of home visiting
6. Self-govern sustainably and effectively

To accomplish these six goals, the Home Visiting Council's four subcommittees carried out the following activities:

Program Support

- Published the [Voices from the Field](#) report to capture the experiences of home visitors providing services in the District
- Created and coordinated a Home Visiting Storytelling Project to demonstrate the value of home visiting to policymakers and the public. Members engaged families and home visitors to share their stories through video clips
- Created a social media toolkit and led a successful social media event to elevate the Home Visiting Storytelling Project videos and stories
- Hosted COVID-19 town halls for home visiting programs and provided updates to the full Home Visiting Council on adaptations and needs

Advocacy *(Note: all advocacy activities are conducted by organizational members of the advocacy subcommittee and do not represent the full Home Visiting Council.)*

- Supported the Home Visiting Storytelling Project to communicate the value of home visiting program funding to policymakers
- Developed messaging and language to communicate the importance of home visiting to policymakers at budget and performance oversight hearings
- Hosted an advocacy and storytelling training to home visitors interested in elevating their voices in a public setting
- Promoted alignment around home visiting across early childhood initiatives and sought out external partners to join the Home Visiting Council to further collaborate
- Began preliminary research for the Policy Recommendations Brief in response to the Voices from the Field Report.

C-Intake Process

- Developed a new universal referral form to streamline the referral process across the District. This form will allow providers (home visiting programs, pediatricians, MCOs, etc.) to use one consistent document to refer eligible families to home visiting services.
- Continued a strong partnership with DC Health to develop a coordinated, centralized intake system for home visiting through the District's Help Me Grow program within the Early Childhood Health Division. The c-intake system completed its pre-pilot phase this year and plans to launch an official pilot in 2022.
- Collaborated with Help Me Grow Care Coordinators to develop a referral decision tree map to support the c-intake process. The decision tree allows Care Coordinators to review an individual family's needs, follow the decision tree's path based on the family's circumstances, goals, eligibility, and refer the family to the home visiting program best suited to support them.
- Interviewed home visiting programs about their program goals, eligibility requirements, and referral process to inform the creation of the referral decision tree.

Data

- Collected home visiting data from programs to support the work of the Home Visiting Council. Specifically the committee's data informed the annual report, advocacy, and the development of committee goals and projects.
- Workshopped new survey questions for home visiting program administrators to strengthen the current home visiting data around measures of program success, home visitor salaries, and COVID-19 impacts on programs.

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