



## **Assessing Community Readiness for Home Visiting: A Toolkit**

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## Part 1. Getting Started

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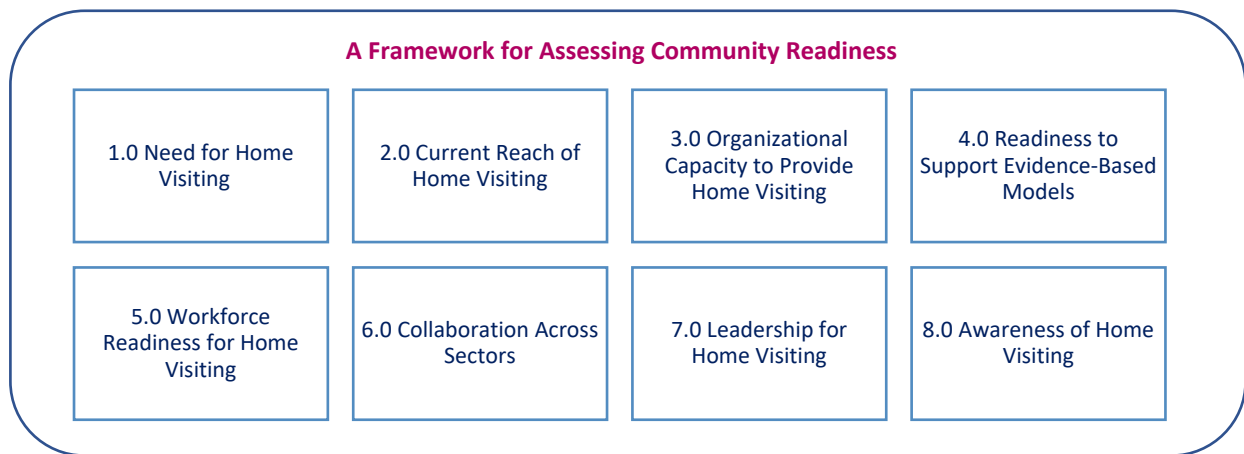
Home visiting is an essential service for supporting healthy children and families across Virginia and the need for home visiting services in Virginia communities is substantial. Multiple needs assessments indicate existing home visiting services are essential for community health and well-being. However, too many communities lack enough home visiting capacity to meet the needs of children and families.

To address this challenge, we need multiple stakeholders working together at the community and state level to sustain, strengthen, and expand home visiting services. Ideally, this work should be informed by a ‘community readiness assessment’ that provides data and insights for strategy development.

This toolkit is designed to help home visiting stakeholders assess community readiness and use the results to inform planning and development of home visiting programs. This introductory section provides additional background on the purpose of community readiness assessment. The rest of the document presents a series of worksheets for guiding your work.

### 1. What is community readiness assessment?

Community readiness can be defined as the extent to which a community is able and prepared to meet the home visiting needs of young children and their families. This toolkit provides a framework to assess community readiness for implementing or expanding a particular home visiting program. The framework includes eight core elements as outlined below. The series of worksheets provided in this toolkit provide guidance for assessing community readiness based on these elements.



## 2. When should we conduct a community readiness assessment?

Each Virginia community has a distinctive set of home visiting needs. Likewise, each community has an existing capacity for home visiting that is likely to have both strengths and gaps. It is essential to understand these community dynamics, and use resulting insights to inform home visiting strategies at the state and local level.

This toolkit is intended to help home visiting professionals assess community readiness for expanding or creating home visiting programs. A community readiness assessment can be conducted by home visiting agencies at the local level, or by statewide organizations and public agencies that need to make decisions about where to target resources for home visiting. Whatever the application scenario may be, the recommended approach is to apply the toolkit when you are considering expanding or creating a specific home visiting program model. In the process, you are likely to discover both strengths and gaps in community readiness for the home visiting program of interest. This type of information can be essential for guiding decisions about whether and how to expand or create a home visiting program in a community.

## 3. Who should be involved in conducting a community readiness assessment?

We recommend conducting community readiness assessments in collaboration with other community stakeholders whenever it is feasible to do so. A guiding principle reflected throughout this toolkit is that building capacity for home visiting is a shared responsibility of state and local stakeholders. Ideally the process of assessing community readiness should be collaborative, including multiple perspectives from community service providers, community leaders, and other stakeholders including families.

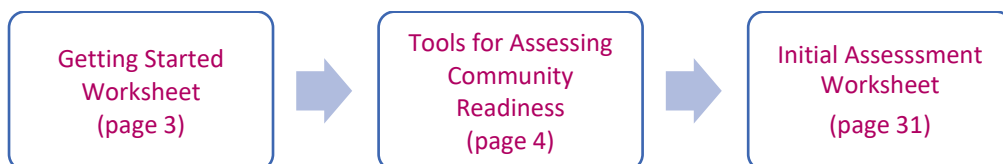
## 4. Where can we find additional resources to support community readiness assessment?

Early Impact Virginia is here to provide guidance and information if you have any questions about how to proceed with your community readiness assessment. You can also consult with home visiting program staff within your community and at the state level.

## 5. How can we get started with a community readiness assessment?

The following worksheets are designed to help you get started with a community readiness assessment for starting or expanding a home visiting program.

1. As a first step, use the **Getting Started Worksheet** on **page 3** to plan your approach.
2. Use the **tools** beginning on **page 4** as needed to assess eight elements within the community readiness framework. Each worksheet includes a brief Purpose and a set of steps for conducting a strategic assessment of community readiness related to the particular element.
3. Next, convene the team and complete the **Initial Assessment Worksheet** on page 31. The results will provide an initial indication of the 'fit' between the envisioned program and the community. Don't be surprised if more work will be required to further develop one or more of the elements, as this is to be expected.



**Getting Started Worksheet**



Use this tool to think about your focus, partners, scope, and process for the community readiness assessment. Note that it will be important to review the purpose, scope, and process with each new partner in your project.

**1. Define the focus**

- Are we considering creating a new program, or expanding an existing program?
- In what community (or communities) would the program be implemented?
- Who are the primary audiences for the assessment? (e.g., federal agencies, state agencies, local government, grant funders, community service partners, community residents, other).

**2. Engage partners**

- A community readiness assessment should ideally include a team of people who can help gather information and provide insight and guidance for the work.
- How are families with lived experience of home visiting and the local community being included in this process?
- Who should be engaged in the assessment from within your organization?
- Who should be engaged in the assessment from other organizations?

**3. Define the assessment scope**

- Which of the eight elements of community readiness will we be assessing? (All or some)
- What types of data will we need to collect for the assessment?
- What types of analysis and reporting will we need to produce for the assessment?
- Do we have enough people to help with the assessment?

**4. Plan the assessment process**

- By what date should the assessment be completed?
- Who will do the staff work of gathering data, analyzing results, and developing reports?
- Who will provide advisory guidance to inform the process and help interpret results?

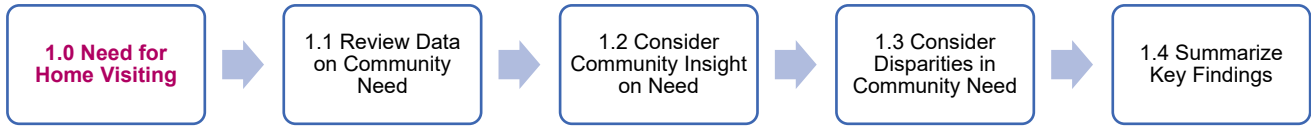
**Notes:**

## Part 2. Tools for Assessing Community Readiness

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**Element 1.0: Need for Home Visiting**



**Purpose**

Community readiness begins with an assessment of potential need for home visiting. Need can be assessed using community indicators and community insight from local professionals and families. This worksheet outlines steps for assessing community need for a home visiting program.

**1.1 Review data on community need**

The first step is to review data on community need for the home visiting program of interest. An estimate of need for each locality is included in **Early Impact Virginia Needs Assessment**. Estimates of need should be further refined by examining trends in demographics at the local level (e.g., race/ethnicity, age of mother, education level, poverty status, immigration status, etc.) Some common risk indicators for pregnant and parenting families are listed below. Raw data for these indicators is also available at the locality level in the Early Impact Virginia Needs Assessment. Use the table below to list the demographics for target populations and risk indicators to further refine community need.

Population	Value
Number of children in households with income <= 200% of poverty.	
Indicators	Value
Number of Live Births	
Teen Pregnancy Rate	
Preterm Birth Rate	
Percent Low Birthweight	
Percent Late/No Prenatal Care	
Child Maltreatment Rate	
Children in Food Insecure Homes	

**Additional Notes**

**1.2 Consider community insight on need**

Community indicators can be supplemented with community insight to produce a more contextualized assessment of community need. Community insight can be obtained from multiple audiences including families, community service providers, local funders, and other community leaders. Use the template below to identify key community stakeholders you would like to engage. Then use the example questions as a guide for asking stakeholders to share their insight.

Whose insight do you need?	Who will you engage? (list)	How will you engage them?
Families		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews
Community service providers		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews
Local funders		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews
Other community leaders		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews

**Questions to consider asking:**

*For families:* Do you know of any families in our community who could benefit from having a home visitor, but cannot find that type of service? (This could include your family as well). Please explain.

*For professionals:* Have you observed any barriers for expectant parents or families with young children to accessing home visiting services? If yes, please describe any barriers you have observed in a few words.

*For professionals:* In your observation, are there community members who seem to have greater unmet needs for home visiting based on their individual or family characteristics? (Characteristics to consider include race, ethnicity, immigration status, gender, income, housing status, where they live, insurance status, or other relevant factors.)

**Additional notes:**



### 1.3 Consider disparities in community need

- Disparities in community need can be defined as comparative differences in the level of unmet need for home visiting based on individual & family characteristics.
- Disparities can be assessed by identifying comparative differences in key **community indicators** such as low-income rates and other relevant maternal and child health indicators.
- Disparities can also be assessed by asking for **community insight** about populations that are especially at-risk for needing but not receiving home visiting services, as outlined in 1.2 on the previous page.
- Use the templates below to consider disparities in need within the population you aim to serve with your home visiting program of interest.

#### Based on available community data and community insight:

Are there community disparities in unmet need by individual & family characteristics? (Characteristics to consider include race, ethnicity, immigration status, gender, income, housing status, where they live, insurance status, or other relevant factors.) Describe below.

#### Additional notes:

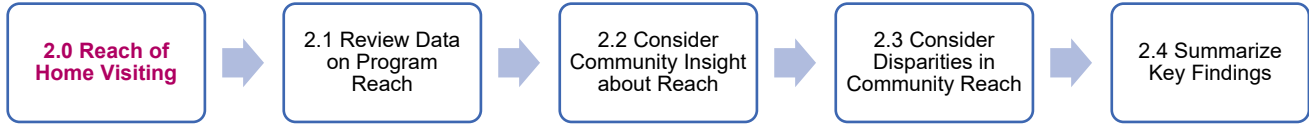
**1.4 Summarize key findings about community need**

Use the template below to summarize key findings about community need based on results from steps 1.1 – 1.3

Summary Points:	
a. (From 1.1) The estimated number of families in need is:	
b. (From 1.2) Key community insights to consider include:	
c. (From 1.3) Populations at risk for disparities in unmet need include:	
d. Our overall assessment of community need is:	<input type="checkbox"/> There is a demonstrable need for expanding access to the home visiting program of interest. <input type="checkbox"/> There is no demonstrable need for expanding access to the home visiting program of interest. <input type="checkbox"/> There is not enough information to demonstrate the presence or absence of need.

Additional notes:

### Element 2.0: Reach of Home Visiting



#### Purpose

Reach of home visiting can be defined as the extent to which home visiting programs actually reach the number of families in need. Reach can be assessed using a combination of community indicators and community insight from key stakeholders. This worksheet outlines steps for assessing community reach for a home visiting program.

#### 2.1 Review data on program reach

- A starting point for estimating community reach is the number of children who need the home visiting program, as estimated in **Step 1.1**. Enter this estimate in *Line 1* below.
- The next step is to estimate the number of children in the community already being reached (or served) by the home visiting program. Early Impact Virginia collects this data on an annual basis from home visiting programs across Virginia. Estimated numbers of children served by locality is included in the **Early Impact Virginia Needs Assessment**. If there is no home visiting program in the community, this estimate would be zero. Enter this estimate in *Line 2*.
- The third step is to estimate the **number and percent of children in need who are not being reached** by the home visiting program. Enter these estimates in lines 3 and 4.

Indicators		Estimates
Line 1	Estimated number of children who need the home visiting program (from Step 1.1)	<input type="text"/>
Line 2	Estimated number of children already being reached (served) in the home visiting program (from existing records or program staff)	<input type="text"/>
Line 3	Estimated number of children in need not already being reached (served) in the home visiting program (Line 1 - Line 2)	<input type="text"/>
Line 4	Estimated percent of children in need but not being reached (Line 3 / Line 1)	<input type="text"/>

#### Additional notes:

**2.2 Consider community insight about reach**

Community indicators of reach can be supplemented with community insight to produce a more contextualized assessment of community reach. Community insight can be obtained from multiple audiences including families, community service providers, local funders, and other community leaders. Use the template below to identify key community stakeholders you would like to engage. Then use the example questions as a guide for asking stakeholders to share their insight.

Whose insight do you need?	Who will you engage? (list)	How will you engage them?
Families		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews
Community service providers		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews
Local funders		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews
Other community leaders		<input type="checkbox"/> Email (individual or group) <input type="checkbox"/> Individual interviews <input type="checkbox"/> Group interviews

**Questions to consider asking:**

*For families:* Do you know of any families in our community who need home visiting services but are not being reached with information and supports for obtaining home visiting? (This could include your family as well). Please describe the types of families not being reached and share any ideas for how we can do a better job of outreach.

*For professionals:* In your observation, are there families in our community who need home visiting services but are not being reached with information and supports for obtaining home visiting? Please describe.

*For professionals:* In your observation about community outreach to families, where are we doing a good job, and where could we improve our reach?

**Additional notes:**

### 2.3 Consider disparities in the reach of home visiting

- Disparities in reach can be defined as comparative differences in family exposure to information and supports for engaging in home visiting services, based on individual & family characteristics.
- Disparities can be assessed by identifying comparative differences in **outreach indicators** such as the number of families reached by home visiting communication campaigns and offered home visiting services.
- Disparities can also be assessed by asking for **community insight** about populations that are especially at-risk for missing out on communication campaigns and other supports for engaging in home visiting.

#### Based on available community indicators and community insight:

Are we reaching all community members in need of home visiting services? Are there differences in reach based on race, ethnicity, gender, immigration status, income, housing status, where they live, insurance status, or other relevant factors?

#### Additional notes:

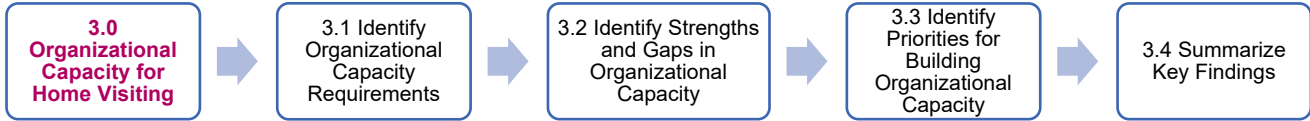
**2.4 Summarize key findings about reach of home visiting**

Use the template below to summarize key findings about reach based on results from steps 2.1 – 2.3

<b>Summary Points:</b>	
a. (From 2.1) The estimated number of children in need not already being reached (served) in the home visiting program is:	
b. (From 2.2) Key community insights to consider include:	
c. (From 2.3) Populations at risk for disparities in reach include:	
d. Priority populations for outreach and support for engaging in the home visiting program include:	

**Additional notes:**

**Element 3.0: Organizational Capacity for Home Visiting**



<b>Purpose</b>	
Organizational capacity for home visiting can be defined as the capability of an organization to effectively manage and implement a home visiting program. This worksheet provides steps for assessing organizational capacity for implementing a home visiting program.	
<b>3.1 Identify organizational capacity requirements</b>	
<ul style="list-style-type: none"> <li><input type="checkbox"/> The first step is to identify the capacity requirements for delivering the home visiting program of interest.</li> <li><input type="checkbox"/> Information on capacity requirements can be obtained from the state or national model office of home visiting programs.</li> <li><input type="checkbox"/> Use the template below to outline organizational capacity requirements in each of the functional areas shown.</li> </ul>	
<b>Organizational capacity requirements</b>	
a. Is there already a home visiting program in this community?	
b. Is this existing home visiting program being expanded, or is a new program being added?	
c. Where will the new home visiting program be housed? Or, where is the current program housed?	
d. Does the proposed host organization have experience with early childhood, maternal child health, home visiting, or other related services?	
e. What level of funding will be required to operate this program?	
f. What level of staffing will be required for this program? (e.g., total positions and FTE)	
g. What types of organizational infrastructure will be required for this program? (e.g., training, information systems, policies, procedures)	
h. What is the level of buy in from leadership within the organization to house and champion the home visiting program?	
<b>Additional Notes</b>	

**3.2 Identify strengths and gaps in organizational capacity**

Using the capacity requirements outlined in 3.1 as a guide, use the template below to identify specific strengths and gaps in organizational capacity to operate the home visiting program. Note specific strengths in capacity that need to be sustained, as well as specific gaps that need attention.

Capacity Factor	Current Strengths	Current Gaps
a. Expanding existing program		
b. Adding a new program		
c. Potential Organization/Host Agency/Fiscal sponsor		
d. Experience with early childhood, maternal child health, home visiting, or other related programming?		
e. Funding required to start up/expand		
f. Total Positions (FTE) start up/expansion		
g. Organizational Infrastructure (e.g., training, information systems, policies, procedures)		
h. Buy-in from Organizational Leadership		

**Additional notes:**



### 3.3 Identify priorities for building organizational capacity

Use insights gained in 3.1 and 3.2 to identify priorities for improving organizational capacity related to staffing, infrastructure, and funding. Then identify a set of priorities for capacity building.

Focus	Are there capacity gaps?	If yes, what are the priorities for capacity building?
a. Expanding existing program	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b. Adding a new program	<input type="checkbox"/> Yes <input type="checkbox"/> No	
c. Potential Organization/Host Agency/Fiscal sponsor	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d. Experience with early childhood, maternal child health, home visiting, or other related programming?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
e. Funding required to start up/expand	<input type="checkbox"/> Yes <input type="checkbox"/> No	
f. Total Positions (FTE) start up/expansion	<input type="checkbox"/> Yes <input type="checkbox"/> No	
g. Organizational Infrastructure (e.g., training, information systems, policies, procedures)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
h. Buy-in from Organizational Leadership	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Additional notes:**

**3.4 Summarize key findings about organizational capacity**

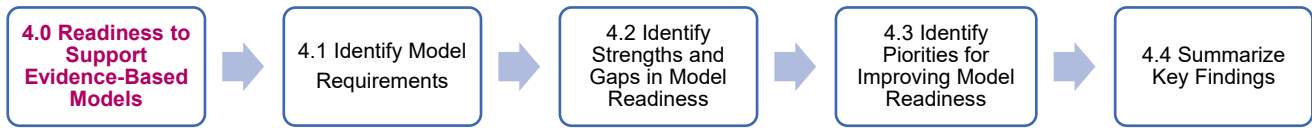
Use the template below to summarize key findings about organizational capacity for your home visiting program of interest.

**Summary Points:**

<p>a. (From 3.1) We have determined the need to expand an existing program or start a new program.</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Not sure</p>
<p>b. (From 3.2) We understand the organizational capacity requirements for this program</p>	<p><input type="checkbox"/> Yes, fully  <input type="checkbox"/> Yes, mostly  <input type="checkbox"/> Not yet</p>
<p>c. (From 3.3) We have identified a set of priorities for organizational capacity building</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> Not yet  <input type="checkbox"/> No, none needed</p>
<p>d. Our initial action steps for building organizational capacity will include:</p>	

**Additional notes:**

### Element 4.0: Readiness to Support Evidence-Based Models for Home Visiting



**Purpose**

Some home visiting programs are designated as evidence-based models, based on assessments completed by federal agencies and others. Evidence-based home visiting requires adherence to specific standards of operation that must be in place for the program to achieve its intended impact. This worksheet outlines steps for determining whether an organization has adequate capacity to operate an evidence-based model of home visiting. In addition to organizational capacity at the local level, there must also be capacity at the state and/or national level to provide technical assistance, evaluation, and monitoring supports to the local program.

**4.1 Identify evidence-based requirements and support**

The first step toward implementing an evidence-based model is to identify the specific requirements for delivering the program. Use the **columns 1 and 2** in template below to identify home visiting model requirements for your program of interest. The requirements listed are from the webpage on **Home Visiting Evidence of Effectiveness**, Administration for Children and Families, U.S. Department of Health and Human Services. (<https://homvee.acf.hhs.gov/models-implementation-guidelines>). Please contact the state and/or national model office to understand the level of support they are required to provide.

**4.2 Identify strengths and gaps in readiness to implement requirements**

Use columns 3 and 4 in the template to identify any strengths and gaps in readiness to implement the evidence-based model.

Home Visiting Model Criteria	Relevant for this program?	Current Strengths	Current Gaps	State/National Office Capacity to Support
a. Minimum requirements for frequency of visits	<input type="checkbox"/> Yes <input type="checkbox"/> No			
b. Minimum education requirements for home visiting staff	<input type="checkbox"/> Yes <input type="checkbox"/> No			
c. Supervision requirements for home visitors	<input type="checkbox"/> Yes <input type="checkbox"/> No			
d. Pre-service training for home visitors	<input type="checkbox"/> Yes <input type="checkbox"/> No			
e. Fidelity standards for local implementing agencies	<input type="checkbox"/> Yes <input type="checkbox"/> No			
f. System for modeling fidelity	<input type="checkbox"/> Yes <input type="checkbox"/> No			
g. Specific content and activities for home visiting	<input type="checkbox"/> Yes <input type="checkbox"/> No			

**4.3 Identify priorities for improving readiness to implement an evidence-based model**

Use insights gained in 4.1 and 4.2 to identify priorities for improving capacity to operate an evidence-based model of home visiting. Then identify a set of priorities for improving readiness.

Criteria	Are there capacity gaps?	If yes, what are the priorities for improving readiness?
a. Minimum requirements for frequency of visits	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b. Minimum education requirements for home visiting staff	<input type="checkbox"/> Yes <input type="checkbox"/> No	
c. Supervision requirements for home visitors	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d. Pre-service training for home visitors	<input type="checkbox"/> Yes <input type="checkbox"/> No	
e. Fidelity standards for local implementing agencies	<input type="checkbox"/> Yes <input type="checkbox"/> No	
f. System for modeling fidelity	<input type="checkbox"/> Yes <input type="checkbox"/> No	
g. Specific content and activities for home visiting	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Additional notes:**

**4.4 Summarize key findings about evidence-based requirements and support**

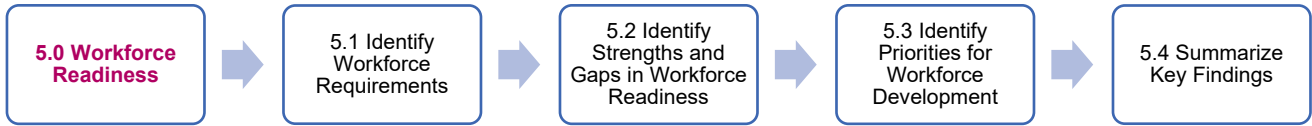
Use the template below to summarize key findings about readiness to implement a home visiting model.

**Summary Points:**

<p>a. (From 4.1) We understand the requirements and support for evidence-based models.</p>	<p><input type="checkbox"/> Yes, fully  <input type="checkbox"/> Yes, mostly  <input type="checkbox"/> No, not yet</p>
<p>b. (From 4.3) We have identified a set of priorities to build capacity towards implementing at the local and model office level (list):</p>	
<p>c. Our initial action steps for building capacity will include:</p>	

**Additional notes:**

**Element 5.0: Workforce Readiness for Home Visiting**



**Purpose**

The workforce for home visiting can be defined as the supply of professionals available to meet the staffing needs of home visiting programs. An adequate workforce would have enough professionals with required credentials and levels of skill to deliver the home visiting program effectively. This worksheet outlines steps for assessing the adequacy of the home visiting workforce for your program of interest.

**5.1 Identify workforce requirements**

The first step is to identify the workforce requirements for delivering this home visiting model, as outlined in elements 3.0 and 4.0.

Home visiting workforce requirements	
a. (From 3.1) How many home visiting staff will be required to deliver this program? (Total positions and FTE)	
b. (From 3.1 and 4.1) What type of training and credentials will the home visiting staff require?	
c. What will be the estimated annual cost of the home visiting staff per position and in total? (Including wages and benefits)	

**Additional notes**

**5.2 Identify strengths and gaps in workforce readiness**

Use the template below to assess the readiness of the workforce for the home visiting program of interest. Also identify any current strengths or gaps between what is required and what is actually available.

Considerations for workforce readiness		Current Strengths	Current Gaps
a. Do we have existing capacity to meet the staffing needs for this program?	<input type="checkbox"/> Yes, fully <input type="checkbox"/> Yes, partly <input type="checkbox"/> No		
b. Do we have an adequate pool of candidates from the local community right now?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure		
c. Do we have a community strategy for increasing the supply of home visiting professionals required for this program?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure		

**Additional notes**

### 5.3 Identify priorities for improving workforce readiness

Use insights gained in 5.1 and 5.2 to identify priorities for improving workforce readiness

Possibilities for meeting workforce needs		What are the priorities for action?
a. Could we meet staffing needs with our existing staff capacity?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
b. Could we enhance staffing resources by collaborating with other agencies in our community?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
c. Could we work with state and local entities to create a workforce development strategy for the future?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	

**Additional notes:**



**5.4 Summarize key findings about workforce readiness**

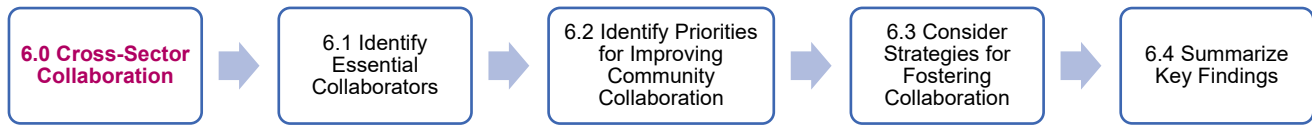
Use the template below to summarize key findings about workforce readiness for your home visiting program of interest.

**Summary Points:**

<p>a. (From 5.1) We understand the total number of home visiting staff and cost required to operate the program.</p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> Not sure</p>
<p>b. (From 5.2) We have identified strengths and gaps in workforce readiness to operate the program.</p>	<p><input type="checkbox"/> Yes, fully  <input type="checkbox"/> Yes, mostly  <input type="checkbox"/> Not yet</p>
<p>c. (From 5.3) We can meet the staffing requirements for this program by (check all that apply):</p>	<p><input type="checkbox"/> Using existing internal resources  <input type="checkbox"/> Collaborating with other organizations for home visiting service delivery  <input type="checkbox"/> Collaborating with other organizations on a workforce development strategy for the future</p>
<p>d. Our initial priorities for improving workforce readiness will include (list):</p>	

**Additional notes:**

## Element 6.0: Cross-Sector Collaboration



### Purpose

While home visiting can create positive impact for children and families on its own, the impact is strongest when home visiting is delivered as part of a coordinated set of services tailored to meet the needs of families. The ideal approach is for service providers to collaborate across sectors to coordinate services. This tool provides steps for assessing collaboration in your community.

### 6.1 Identify essential collaborators

- Use the **first column** in the template below to list the community and state organizations whose partnership would be essential for optimizing the home visiting program.
- Then use the **second column** to note their ideal collaboration role (e.g., collaborative service delivery, making referrals, receiving referrals, helping to raise awareness, providing financial support, or providing other support to help optimize the home visiting program).

ESSENTIAL Collaborative Partners include:

Local Public Service Agencies: Health, Social Services, Community Services Board, Early Intervention/Part C

Collaborative Partners should include one or more organizations providing the following services:

1. Local Health Department, especially WIC and any Maternal/Child Health Services
2. Private Health Care Providers, especially OB/GYNs, Pediatric providers and Community Doulas
3. Local Hospital System, especially Birthing hospitals
4. Community Services Board, especially Project Link programs
5. Private Mental Health Providers, especially substance use disorder specialists and Perinatal Depression Support
6. Early Childhood Development programs and services, especially Head Start
7. Local Department of Social Services, especially Benefits and Child Protective Services
8. Local Intimate Partner Violence services, including Emergency Shelters
9. Local Homeless Shelters
10. Faith Communities
11. School Systems, including Pre-K and Higher Education
12. Other social and health services

### 6.2 Identify priorities for improving community collaboration

- Use the **third column** in the template to assess the current status of the collaborative relationships.
- Use the **fourth column** to identify collaborative relationships that require priority attention or further development.

Assessing Community Readiness for Home Visiting

Essential collaborators	Ideal collaboration role	The collaborative relationship:	Needs priority attention for further development (Check all that apply)
1.		<input type="checkbox"/> Is already in place <input type="checkbox"/> Is in development	
2.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
3.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
4.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
5.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
6.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
7.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
8.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
9.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
10.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
11.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
12.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
13.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
14.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
15.		<input type="checkbox"/> Already in place <input type="checkbox"/> In development	
Add more as needed...			

### 6.3 Consider strategies for fostering collaboration

Using insights gained in 6.1 and 6.2, think strategically about ways to foster collaboration, such as:

- Inviting leaders from prospective partners to a conversation about collaboration.
- Exploring how collaboration could help advance the mission of each organization.
- Exploring practical ways to collaborate for program development or delivery.
- Defining shared values to guide the collaboration.
- Defining a shared vision of success for the collaboration.

### 6.4 Summarize key findings about community collaboration

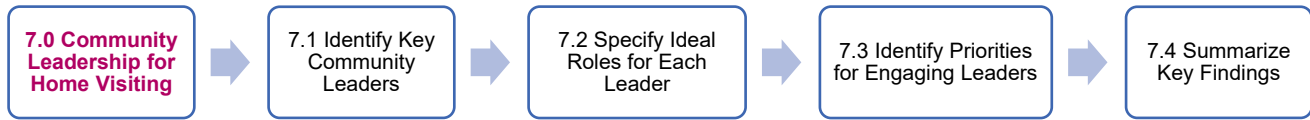
Use the template below to summarize key findings about community collaboration for your home visiting program of interest.

#### Summary Template:

a. (From 6.1) Essential collaborators for this home visiting program include:	
b. (From 6.2) initial priorities for community collaboration include:	
c. (From 6.3) Initial strategies for fostering community collaboration could include:	

#### Additional notes:

## Element 7.0: Community Leadership for Home Visiting



### Purpose

Home visiting programs work best when community leaders from across sectors are supportive of home visiting as a community service. Each of these sectors can play an important role in helping families with young children become aware of and receive the services they need. This tool provides steps for assessing community leadership for home visiting.

### 7.1 Identify key community leaders

- Use the **first column** in the template below to identify community leaders whose support could be essential for optimizing the home visiting program. The list could include leaders from home visiting agencies, community advocacy groups, community coalitions or councils, health care, education, public health, social services, public safety, local government, faith communities, the business sector, and philanthropy.

### 7.2 Specify ideal roles for each key community leader

- Use the **second column** to identify the ideal role you think each key leader could play in helping to develop the home visiting program of interest. This could include leadership support for workforce development, collaborating across sectors, or resource development.

### 7.3 Identify priorities for engaging community leaders

- Use the **third column** in the template to identify which key leaders are likely to support home visiting.
- Use the **fourth column** to identify any leaders who should be prioritized for outreach and engagement.

Key community leader:	Ideal role:	Is this leader likely to support home visiting?	Leaders that need priority attention (check all that apply)
a.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
b.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
c.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
d.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
e.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
Add more as needed...		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	

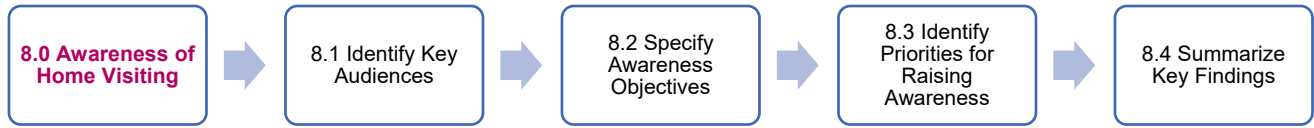
### 7.4 Summarize key findings about leadership

Use the template below to summarize key findings about community leadership for your home visiting program of interest.

Summary Points:	
a. (From 7.1) Essential community leaders for this home visiting program include:	
b. (From 7.2) initial priorities for leadership outreach and engagement include:	
c. (From 7.3) Initial strategies for engaging community leadership could include:	

Additional notes:

**Element 8.0: Awareness of Home Visiting**



**Purpose**

Awareness of home visiting can be defined as the level of community knowledge of family needs and home visiting services. Raising awareness is an important strategy for assuring that families and professionals are ready to engage with a home visiting program. This worksheet outlines steps for assessing awareness of home visiting in your community.

**8.1 Identify key audiences**

- Use the **first column** in the template below to identify key audiences who will need to be aware of your intended home visiting program. The list should include strategies for both families and organizations (e.g., community service providers, local schools, local public health agencies, local human service agencies, faith communities, grant funders, selected state agencies, and more). Refer to target populations identified in Section 1 to create individualized plans for specific demographic groups.

**8.2 Specify awareness objectives for each audience**

- Use the **second column** to specify what each audience needs to know about your intended home visiting program.

**8.3 Identify priorities for raising awareness**

- Use the third **column** to assess the current level of awareness for each audience, based on your experience with each audience.
- Use the **fourth column** to identify audiences that should be prioritized for raising awareness.

Key audience (Be specific)	What they need to know	Current level of awareness (1=low to 5=high)	Priority for raising awareness (1=low to 5=high)
a.			
b.			
c.			
d.			
e.			
Add more as needed...			

**8.4 Summarize key findings about community awareness**

Use the template below to summarize key findings about community awareness for your home visiting program of interest.

<b>Summary Points:</b>	
a. (From 8.1) Key audiences that need to be aware of the intended home visiting program include:	
b. (From 8.2) We have specified what each audience should ideally know about the intended home visiting program:	
c. (From 8.3) Priority audiences for raising awareness include:	

**Additional notes:**



**Initial Assessment Tool**

- Use your ratings to decide whether the community is ready to implement the home visiting program and identify areas where further work is required to achieve a good fit.
- Use the referenced worksheets to address elements that need further work.

Which home visiting program are you considering?		Rating key:	See Assessment Tools on Page
<input type="checkbox"/> CHIP of Virginia <input type="checkbox"/> Resource Mothers <input type="checkbox"/> Healthy Start / Loving Steps <input type="checkbox"/> Healthy Families <input type="checkbox"/> Early Head Start <input type="checkbox"/> Nurse Family Partnership <input type="checkbox"/> Parents as Teachers <input type="checkbox"/> Other Home Visiting Program		1. Adequately in place 2. Needs minor work 3. Needs substantial work	
1.0 Need for Home Visiting	<i>There is documented community need for this home visiting program.</i>	<input type="checkbox"/>	
2.0 Reach of Home Visiting	<i>We understand current reach and solid estimates of how many more families this program could reach.</i>	<input type="checkbox"/>	
3.0 Organizational Capacity to Provide Home Visiting	<i>We have adequate organizational capacity within the community to deliver this program.</i>	<input type="checkbox"/>	
4.0 Model Requirements and Support	<i>We have adequate capacity to deliver the program according to best practice/defined program model standards.</i>	<input type="checkbox"/>	
5.0 Workforce Readiness	<i>We have an adequate workforce within the community to staff and deliver this home visiting program.</i>	<input type="checkbox"/>	
6.0 Collaboration Across Sectors	<i>We have solid commitment from key organizations to collaborate for implementation of this home visiting program.</i>	<input type="checkbox"/>	
7.0 Community Leadership for Home Visiting	<i>We have solid commitment from key community leaders to support development of this home visiting program.</i>	<input type="checkbox"/>	
8.0 Awareness of Home Visiting	<i>Community members and community professionals are aware of this home visiting program and ready to engage.</i>	<input type="checkbox"/>	
Summary Insights on Community Readiness	<input type="checkbox"/> Based on your ratings above, how ready is your community to expand or implement this home visiting program? <input type="checkbox"/> If all ratings are either 'adequately in place' or 'needs minor work,' then there is a good community fit for your program. <input type="checkbox"/> If any elements are rated 'needs substantial work,' consider addressing these elements to create a better community fit.		