



July 15, 2023

**RE: Early Impact Virginia 2023 Annual Report**

Early Impact Virginia is pleased to submit the following Annual Report for activities completed in state fiscal year 2023 as required by:

**Budget Bill - HB5002 (Chapter 2)**

Bill Order » Office of Health and Human Resources » Item 346

Department of Social Services

Authority: Title 2.2, Chapter 54; Title 63.2, Code of Virginia; Title VI, Subtitle B, P.L. 97-35, as amended; P.L. 103-252, as amended; P.L. 104-193, as amended, Federal Code.

**Item 346**

N. Out of this appropriation, \$250,000 the first year and \$600,000 the second year from the federal Temporary Assistance to Needy Families block grant shall be provided to contract with Early Impact Virginia to continue its work in support of Virginia's voluntary home visiting programs. These funds may be used to hire three full-time staff, including a director and an evaluator, and to continue Early Impact Virginia's training partnerships. Early Impact Virginia shall have the authority and responsibility to determine, systematically track, and report annually on the key activities and outcomes of Virginia's home visiting programs; conduct systematic and statewide needs assessments for Virginia's home visiting programs at least once every three years; and to support continuous quality improvement, training, and coordination across Virginia's home visiting programs on an ongoing basis. Early Impact Virginia shall report on its findings to the Chairmen of the House Appropriations and Senate Finance Committees by July 1, 2019 and annually thereafter.

Please do not hesitate to contact me if you need any additional information.

Sincerely,

A handwritten signature in blue ink that reads "Laurel Aparicio". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Laurel Aparicio

Executive Director

(804) 359-6166

[laparicio@earlyimpactva.org](mailto:laparicio@earlyimpactva.org)

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*Home Visiting remains Virginia's most effective strategy for strengthening families and mitigating the impact of increasing violence, decreasing rates of school readiness and a nationwide mental health crisis.*

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## **Executive Summary**

Virginia's home visiting programs are trusted partners in communities throughout the Commonwealth. This trust has been earned over several decades of consistently strong performance, strategic partnerships, and above all, a clear, unwavering commitment to supporting and strengthening families. Virginia home visiting programs are an extraordinary example of the importance of public-private partnership. The system is strong and well-prepared to adapt to the changing needs of Virginia families and communities. Virginia leaders consistently turn to home visiting as the leader in evidence-based strategies demonstrating consistent impact and return on investment. Early Impact Virginia has built the key foundational elements necessary to ensure quality and scaled impact. Consistently, Virginia leaders expect home visiting to produce outcomes, communities understand the importance of quality programming and families want the type of personalized support that is built through relationship and connection with caring, skilled Home Visitors.

Charged by the Virginia General Assembly in SFY'19 with the authority and responsibility to lead statewide efforts, Early Impact Virginia is pleased to present the following report on the state of the Commonwealth's system of home visiting services and supports for expectant parents and families with young children.

Since 2019, Early Impact Virginia has partnered with stakeholders across the state to clearly define the home visiting system, adopt uniform service definitions and standards and collectively determine data indicators to measure impact. With these foundational elements in place, the *Virginia Plan for Home Visiting* was adopted in May 2019. This plan laid out a framework for success, but did not include the specific strategies to get there. The following year, Early Impact Virginia engaged more than 200 stakeholders in a community-based needs assessment and strategic planning process. This work continued in spite of significant disruptions due to the COVID pandemic with Early Impact Virginia publishing the state's first comprehensive [Home Visiting Needs Assessment](#) in 2020 and [Strategic Plan](#) in 2021.

With a bold vision and clear understanding of community strengths and needs, Early Impact Virginia is leading statewide efforts to ensure that the foundational elements are in place for local programs to provide the highest quality services and achieve the greatest impact for all Virginia communities. Early Impact Virginia remains sharply focused on building the home visiting infrastructure while continuing to work in deep partnership with state partners to address systemic issues to optimize efficiency and effectiveness. This work has taken on greater importance as local programs and systems rebound and rebuild post-pandemic. Early Impact Virginia is working with state and local leaders to develop innovative strategies for local programs to regain their footing and to reimagine elements of home visiting system that no longer serve the system well. In particular, Early Impact Virginia is leading efforts to capitalize on technology solutions for systemic impact while also supporting state and local leaders to

address a catastrophic funding crisis that has the potential to wipe out nearly 30 years of progress. State leadership is especially critical now as a statewide funding crisis threatens to eliminate more than two-thirds of local home visiting services. Projected TANF shortfalls will likely mean the **loss of more than \$13,000,000 in THE state directed funding supporting services in 92% of Virginia localities.** Learn more about the Home Visiting Funding Crisis on pages 5-6.

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*Without an immediate replacement of TANF funding, **most home visiting programs will shut down**, leaving Virginia communities and vulnerable families without this critical resource—a **trusted lifeline** for families and one of the **only evidence-based** approaches addressing upstream needs at a time when it is needed most and has the **greatest potential impact.***

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## What is Home Visiting?

Home visiting connects expectant parents and families with young children to a trained, family support professional who provides customized coaching and guidance during pregnancy, postpartum and the early stages of a child's development. Home visitors help parents understand their role as their child's first, and most important, teacher. Home visitors help families realize their strengths, and unlock their child's potential.

### Home Visiting is PROVEN

- Improved maternal & infant health
- Promote equity & reduce health disparities
- Increase school readiness & social-emotional development
- Build healthy, nurturing relationships
- Cost effective - proven to save up to \$5.70 for every dollar invested

To meet the diverse needs of families and communities throughout the Commonwealth, Virginia is home to **eight models of home visiting:**



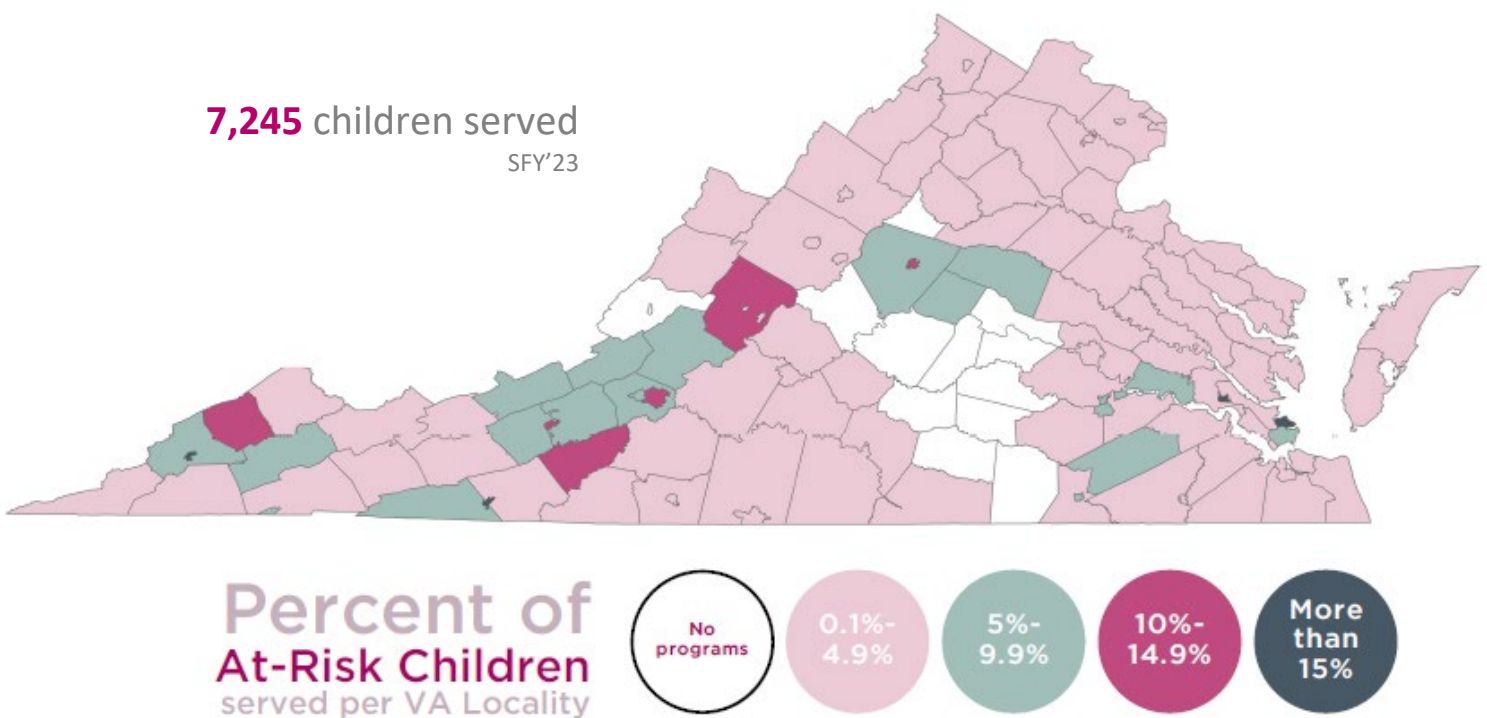
## Early Childhood Home Visiting in Virginia

The foundation for lifelong health and well-being is built in pregnancy and early childhood. The evidence is conclusive and grows daily. The absolute best opportunity to build healthy, safe communities begins with families. Supporting families from the start creates multi-generational change and the pathway to true population health.

For more than 25 years, Virginia Early Childhood Home Visiting programs have partnered with local communities throughout the Commonwealth to strengthen families and improve children's health and well-being. Virginia has a proud history of strong support for evidence-based home visiting. And, while this support remains strong, it has not resulted in the types of strategic investment necessary for efficient administration or scaling of services for impact. Leaders consistently demonstrate an unyielding commitment to achieving the absolute best outcomes for young children. This commitment has never been more essential as Virginia's home visiting system faces significant challenges that require clear leadership and strategic investment to ensure future success.

## How Virginia Delivers Services

Virginia is home to 72 local early childhood home visiting programs serving 123 communities.



A community-based service, early childhood home visiting programs currently serve ninety-two (92%) of Virginia localities. A reflection of unique public-private partnership, home visiting services are administered through local non-profit organizations, health systems and public agencies.

## The Funding Landscape

Virginia has a demonstrated track record of public-private collaboration across home visiting program models to leverage scarce resources. Effective leveraging of state and local

investments for sustained service delivery can only be successful with dedicated stable and predictable investment.

Current investment in local home visiting services totals approximately **\$35 million**. Most local programs rely on multiple funding sources. Federal funding is by far the greatest source of investment in Virginia program services at \$19.5 million. State general fund dollars make up less than one percent (<1%) of overall funding for home visiting at \$832,946

Currently, TANF funding for home visiting is legislatively directed, exceeds \$13M each year and provides the key foundational funding used by localities to leverage an additional \$11M for direct services. Additionally, TANF funding supports the critical statewide infrastructure necessary for ensuring the highest quality services to families in more than ninety percent (90%) of Virginia communities.

The following chart illustrates how local communities leverage federal funding to support services to families throughout the Commonwealth, including:

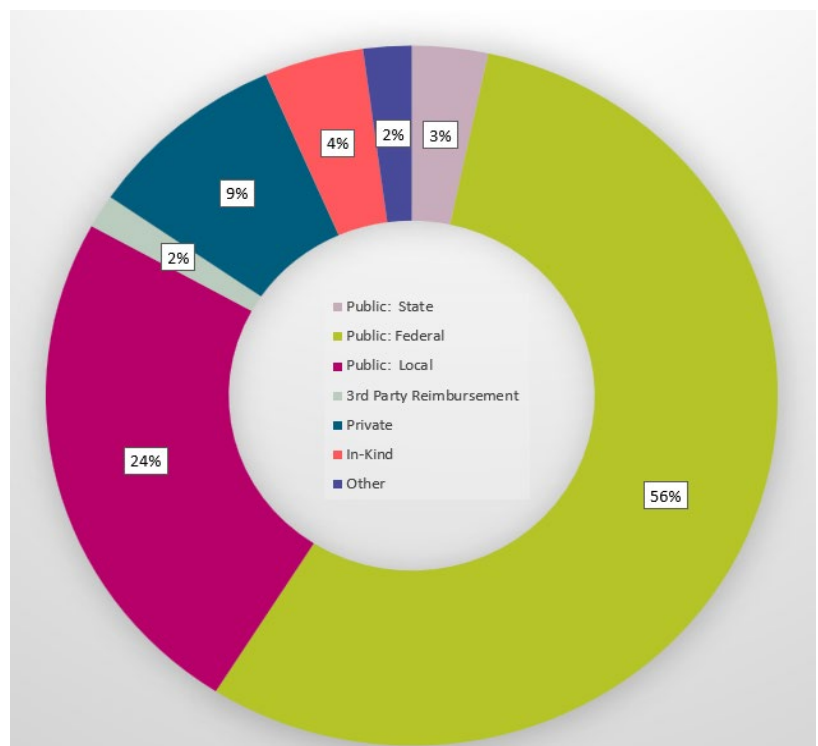
Local Funding	\$8.5 million
Private Funding	\$3.1 million
In-kind contributions	\$1.5 million
Third Party Funding	\$0.5 million
Other Funding	\$0.7 million

### The Home Visiting Funding Crisis

Virginia’s fiscal commitment to home visiting is largely made up of discretionary TANF funding resulting from reserves built up over a number of years when program revenue exceeded expenditures. This trend has slowly reversed as TANF payments have risen in recent years and Virginia leaders increasingly relied on discretionary TANF reserve funds for support of allowable social service programs, like home visiting.

Of the nearly \$20 million dollars in federal funding supporting community-based Virginia home visiting services, more than half is legislatively directed TANF funding (~\$13.1 million). All of this funding may be eliminated at the end of this fiscal year. Without an immediate replacement of this funding, most home visiting programs will shut down, leaving Virginia communities and vulnerable families without this critical resource—a trusted lifeline for families and one of the only evidence-based approaches addressing upstream needs at a time when it is needed most and has the greatest potential impact.

Local Program Funding (SFY'23) **\$35M\***



\*Does not include Early Head Start and Family Spirit

In 2022, the Virginia Legislature directed the Virginia Department of Social Services to study TANF spending and make recommendations to ensure structural balance in TANF spending. This report was presented in January 2023 and concludes:

1. TANF Obligations currently exceed federal funding by approximately \$61M/year.
2. The projected TANF balance as of 6/30/24 will be \$4M.

Recommendations:

1. Use TANF block grant to mitigate the impact benefit loss that low-income families will experience at the end of the public health emergency.
2. Use state general funds to support programs currently funded through Reserve funding.
3. To decide which programs to fund, consider the following:
  - a. Does the program further the purpose of TANF?
  - b. Does the program receive other state or federal funding?
  - c. Should program funding be adjusted or eliminated based on historical spending?

**TANF** supports Home Visiting Services for **4,574 children in 123 Virginia communities** and critical statewide systems, including:

- Workforce Development
- Training and Technical Assistance for model fidelity
- Data Solutions
- Evaluation and Research
- Continuous Quality Improvement

### **\$13,035,501 Total TANF Funding**

\$ 9,035,501	Healthy Families Virginia 30 programs/81 localities/2,544 families
\$ 2,400,000	CHIP of Virginia 6 programs/33 localities/1,254 families
\$ 1,000,000	Resource Mothers 6 programs/35 localities/172 families
\$ 600,000	Early Impact Virginia 72 local programs/Essential Infrastructure

*It has become a huge part of our family not just as an important resource to help address concerns but healthy families have become a part of our family. They have been with us since I found out I was pregnant and my son is now 3. We don't have family and they have filled that hole. They are a big part of our community and other families deserve to have the chance to feel how big of an impact it can have on their lives. Because for us Healthy Families isn't just a program it's now part of our family.*

*~Brittany, Stuart, VA*

Given the significant investment, well established impact and clear need, it is time for state policy makers to lead the change necessary by identifying stable, predictable funding and advancing policy for effective system change.

EIV, home visiting providers and partners cannot do this alone. We need help.

### **Evidence of Effectiveness**

Virginia home visiting program models continue to work to collect and report uniform outcome data. Until unified outcome reporting is possible, the following data has been selected to demonstrate the effectiveness. Taken directly from 2022 annual evaluation reports provided by Virginia program model offices, these data points were selected not only to demonstrate effectiveness, but to also illustrate the breadth of service activities and effectiveness.

50% of all participating mothers reported that they themselves had been abused as children. **Yet over 99% of participating children had no founded cases of child abuse or neglect.** This result strongly suggests that Healthy Families services are successfully **breaking the cycle of violence.**\*



Maternal Health



Child Health



School Readiness

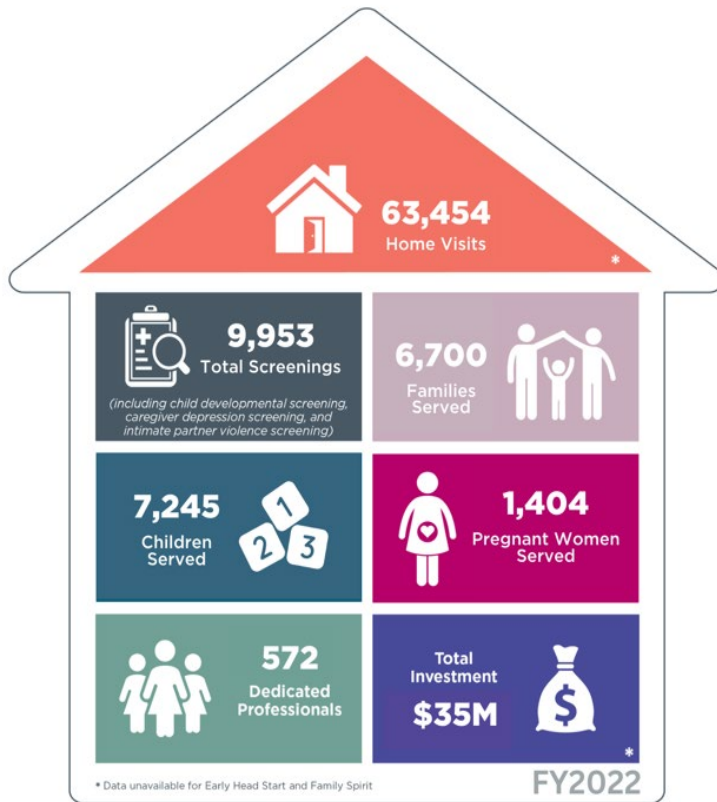


Relational Health



Family Functioning

Domain & Indicator	Selected 2022 Outcomes	Virginia Program
<b>Maternal &amp; Child Health</b>		
Healthy Birth	5.4% of babies were born pre-term (VA pre-term birth rate 9.9%)	Nurse Family Partnership
Health Insurance	97% of women and children were enrolled in health insurance	Loving Steps/Healthy Start
Well-Child Visits	95% of children received well-child visits on schedule	Parents as Teachers
Medical Home	93.6% of children have a medical home	CHIP of Virginia
Unintended injury	.02% of children experienced an injury related ER visit	Nurse Family Partnership
Substance Abuse	98.2% with positive substance abuse screens were monitored and connected with services. 100% continued receiving home visiting svcs	Healthy Families Virginia
<b>School Readiness</b>		
Early identification of developmental delays	90% of children referred for potential health and/or developmental delays qualified for follow-up services	Parents as Teachers
Early Intervention referral	100% with positive screen received services in a timely manner	Nurse Family Partnership
<b>Relational Health</b>		
*Child Abuse and Neglect	.75% founded incidents of child abuse or neglect among (n=1,594)	Healthy Families Virginia
Perinatal Depression	100% with positive depression screen were connected with services.	Loving Steps/Healthy Start
Intimate Partner Violence (IPV)	98.2% with positive IPV screens were monitored and connected with services. 100% continued receiving home visiting svcs	Healthy Families Virginia
<b>Family Functioning</b>		
Employment	13% increase in families with one or both parents employed after 1 year	CHIP of Virginia
Food Insecurity	47.1% decrease in families with unmet food needs after one year	CHIP of Virginia



## 2022 Service Data

During the pandemic, local providers capitalized on the changing ways in which families were engaging. With new virtual and telehealth strategies in place, home visitors began to see many families reaching out and engaging with greater frequency and often in very different ways. Home visitors observed that families were taking on a very different role in their relationship and often seemed more at ease leading activities with the home visitor providing coaching virtually. Entirely new connections were being discovered and home visitors found themselves tapping into different skills in new and unique ways. Overwhelmingly, families reported that the support they received from home visitors

was invaluable. Time and again, families shared sentiments like, *“I don’t know what I would have done without her”* and *“My home visitor was my lifeline during the pandemic”*. After several years providing pandemic impacted services, the data began to illustrate these shifts as relationships with families deepened, but fewer families were reached.

These trends are evident in the following chart demonstrating that while the number of families served and the home visiting workforce decreased, the connection to families has continued to deepen. Initially this may have been due in large part to the increasing needs and anxiety experienced by families. Social distancing and lock downs also meant that families were more likely to be at home and more readily available for connection. However, as things are returning to pre-pandemic conditions, these trends have remained relatively constant. Continued monitoring and study of this data will help to inform opportunities for service improvement and system change.

SFY'	2019	2020	2021	2022	% Change*
Home Visits	79,382	81,852	73,878	63,454	-20%
Children Served	9,852	8,677	8,024	7,245	-26%
Pregnant Women	2,475	1,577	1,859	1,404	-43%
Workforce	797	756	614	572	-28 %
Connection with Families		+16%	+14%	+9%	

\*2019--2022



These trends also clearly illustrate that our work to strengthen home visiting system infrastructure and streamline those parts of the system within our control is working. Home visitors are able to spend more time connecting with families—their primary role. However, external circumstances including increasing risk and need among families with young children, on-going fragmentation across the collective human service sector and flat funding are undermining home visiting reach at a staggering rate.

Workforce development and retention remains the single greatest opportunity for optimizing impact and return on investment as staff turnover has devastating effects on family engagement and success. As a relationship-based service, the following workforce factors influence effectiveness:

**Staff Training and Preparation:** New staff require extensive training across 100+ areas of competency and specific implementation strategies for model fidelity.

**Limited Caseloads:** Caseloads must remain limited until inexperienced home visitors are fully prepared and then gradually increase over time (6 months to two years).

**Higher Intensity:** Newly enrolled families have the greatest needs and receive more home visits to build relationships and address family priorities.

**Longevity:** As a relationship-based service, home visitor turnover directly impacts family engagement. Traditionally, when home visitors leave positions, well over 50% of that home visitor's caseload discontinues services, significantly impacting individual and program outcomes.

In summary, it takes time for new staff to gain the skills and experience needed to nurture meaningful connection with families. And new staff are most likely to be serving newly enrolled families with greater needs and visit frequency, resulting in lower caseloads. Recurrent turnover seriously depresses the number of families receiving services, the length of time families remain enrolled in services and overall impact.

Preparing and supporting the home visiting workforce remains a top EIV priority. EIV continues to lead this work by focusing on the application of competency-based standards, optimization of recruitment and retention strategies, and the intentional development of career ladders with competitive compensation systems. See pages 21-28 for details on each of these activities.

EIV continues to lead efforts to create mechanisms and policy to advance informed decision making at all levels. This is critical for long term success and impact as much of the existing system developed decades ago and must now evolve to meeting changing community needs, funding priorities and shifting business models. The home visiting system must be prepared and supported to effectively implement significant changes in administration. EIV continues to work

in partnership with state and local leaders to support effective change, minimizing service disruption while streamlining administration.

It is a true testament of the deep commitment of local providers and strength of the home visiting system that in spite of extensive challenges, home visiting programs partnered with nearly 7,000 families in 123 communities all across the Commonwealth to build parenting skills, enhance family functioning and support healthy child development.

## Rebuilding Post-Pandemic

Over the last year, local programs continued to face new challenges as they worked to adapt to rapidly changing systems, many of which no longer effectively support traditional ways of doing business. While virtual and telehealth practice offers greater flexibility in service delivery, local programs continue to find that families want the in-person experience that is the hallmark of home visiting. And, for most families, in-person service delivery builds deeper connection and sustained outcomes. As a system, we are working to better understand the efficacy of virtual service delivery and under which circumstances and for whom it is most effective.

During SFY'21-22, local programs transitioned back to in-person home visits with virtual service delivery becoming the exception rather than the rule. Together with program model developers, local service providers are determining when and how to use virtual practice to supplement services while maintaining fidelity to model standards and requirements. Primary considerations influencing virtual service delivery decisions are made based on family desire and environmental concerns, including:

- Family health concerns (sick parent, child or other family member)
- Family convenience (family is not at home, prefers to connect virtually)
- Safety concerns – home or neighborhood (surge in community violence is limiting in-person services in a number of communities)
- Weather conditions

In these instances, technology allows local programs to maintain connections with families that in the past would not have been possible or practical.

While technology is certainly expanding the practice opportunities, it is also continuing to disrupt local program referral systems. On the surface, it seems counterintuitive that this would be the case, particularly as technology so clearly offers much greater opportunity for efficient referrals and connection across numerous providers. However, without key foundational elements in place, local

“As a pediatrician, honestly, I wish more of my families had home visitation. The ones that do really love it.”



“When parents tell me they have home visiting I feel a sigh of relief because I know someone is in the home checking on things and supporting the whole family, and I especially love it when home visiting staff contact me so we can discuss any issues or concerns that arise with a specific family.”

**Dr. Bergen Nelson**  
Children's Hospital of Richmond/VCU

programs are currently experiencing just the opposite as providers must re-establish relationships with referral organizations that have gone through tremendous transformation in staffing and practice. Early childhood services, including critical health and behavioral health services, remain highly fragmented and community resources continue to vary greatly. These factors undermine systemic, cost-effective strategies, leaving local programs to build and continually nurture referral relationships across disparate provider groups and organizations. This approach is costly and shifts resources away from service delivery.

Local home visiting programs have traditionally relied upon several key strategies for family recruitment and engagement:

- Outreach in local health or human service organizations
- Health care provider referral and connection
- Word of mouth (current families refer friends and family members)
- Local partner referrals

What each of these strategies have in common is relationship and human connection—not readily replaced by technology without systemic change—but all disrupted during the pandemic. As home visiting relied on virtual strategies to maintain relationships with enrolled families, the opportunity for outreach and connection with rapidly changing systems and providers was largely lost. And, so, as local programs rebound and return to traditional approaches, many are struggling to regain their footing among the changed landscape.

### Workforce Challenges

As previously reported, workforce recruitment and retention, a statewide issue among human service providers, continues to present a significant challenge for many local programs. Cumulatively, the home visiting workforce lost 42 staff over the last year. This represents a seven percent (7%) reduction in staffing, contributing to the overall trend that amounts to a twenty-eight percent (28%) reduction over the last four years.

Flat funding, low wages, a highly competitive job market and a reduced labor pool have all contributed to this current workforce situation. Additionally, increasing needs of enrolled families, escalating neighborhood violence and limited community resources are contributing to staff burn-out and stress. Overwhelmingly, local providers cite

### Salary Ranges

#### Home Visitors

Program Location	Lowest Home Visitor Salary	Average Home Visitor Salary	Highest Home Visitor Salary
Urban	\$31,196	\$42,763	\$64,888
Urban/Rural	\$31,761	\$39,430	\$55,000
Rural	\$24,313	\$32,883	\$39,100
<b>All Regions</b>	<b>\$24,313</b>	<b>\$40,635</b>	<b>\$64,888</b>

#### Nurse Home Visitors

Program Location	Lowest Nurse HV Salary	Average Nurse HV Salary	Highest Nurse HV Salary
Urban	\$48,212	\$60,337	\$80,369
Urban/Rural	\$43,888	\$54,972	\$64,000
Rural	\$64,000*	\$64,000*	\$64,000*
<b>All Regions</b>	<b>\$43,888</b>	<b>\$60,523</b>	<b>\$64,000</b>

\*Only one program serving rural areas reported a Nurse Home Visitor salary.

#### Supervisors

Program Location	Lowest Supervisor Salary	Average Supervisor Salary	Highest Supervisor Salary
Urban	\$41,787	\$60,136	\$106,088
Urban/Rural	\$34,000	\$52,174	\$68,000
Rural	\$39,000	\$51,300	\$79,000
<b>All Regions</b>	<b>\$34,000</b>	<b>\$56,999</b>	<b>\$106,088</b>

poor compensation as the greatest factor influencing staff turnover. While staff turnover presents a significant issue for the field, local programs do not experience it uniformly with 52% of local programs reporting that home visitor turnover is a current concern and 48% reporting little concern. However, 83% of local programs are concerned about program supervisor turnover—an alarming concern for our field. Program supervisors are the linchpins supporting overall program effectiveness. And, it was program supervisors who provided critical support for service providers throughout the stressful transitions in and out of the pandemic.

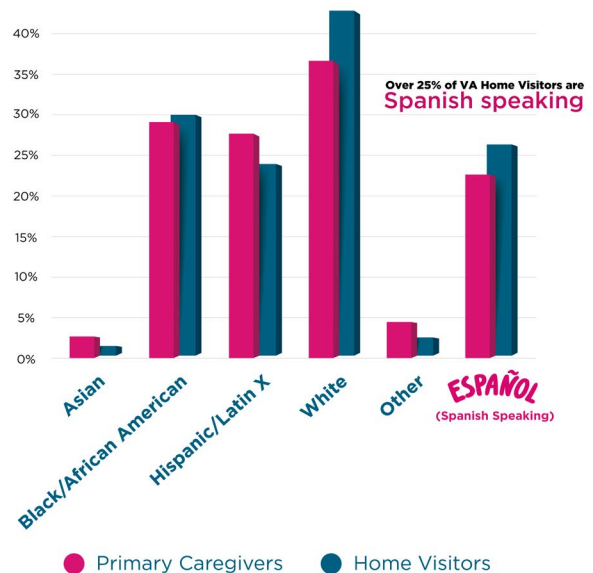
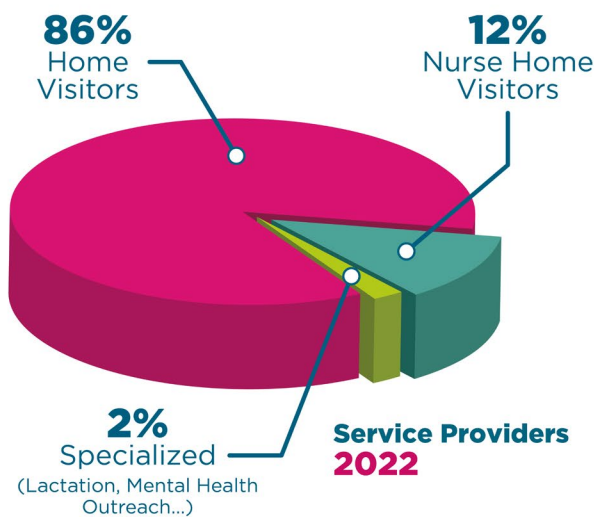
Addressing workforce and service delivery challenges requires significant investment of time and resources across the entire system, from supporting local recruitment efforts to building lucrative pathways into the field through higher salaries and meaningful opportunities for professional growth and career advancement.

To fully appreciate the scope of issues related to compensation, EIV collected statewide workforce and salary data to better understand staffing dynamics, isolate specific needs and target support to those local programs experiencing significant turnover. This salary information provides a baseline from which to better understand and address provider compensation.

To ensure that the home visiting workforce remains representative of the client population, EIV again collected demographic data to better understand the racial, ethnic and linguistic characteristics of those families receiving services and home visitors providing services. Consistent with baseline data collected last year, the Virginia home visiting workforce continues to reflect families enrolled. It is important to note that this data does not reflect a one-to-one ratio of providers to participants, but rather a snapshot of the statewide percentages of each.

## VA Home Visitors

Reflect Virginia Families Served & Our Community Needs



SFY' 23

## Early Impact Virginia Summary of Activities and Achievements

Virginia’s home visiting system continues to serve as an example of the vital role that public-private collaboration can play in building effective, innovative approaches to service delivery. Sustaining and expanding home visiting services to achieve the promise of prevention requires a higher level of coordination across early childhood systems. While evidence-based programming is essential to strong outcomes, so too is the need for comprehensive, integrated early childhood systems. Optimizing the Commonwealth’s investment in early childhood home visiting and building a strong foundation for the future can only be achieved through deliberate planning and strong, committed leadership.

Between July 1, 2022 and June 30, 2023, Early Impact Virginia continued to maximize the impact of home visiting in Virginia by providing leadership at the state level, embracing collaboration with multiple partners, fostering innovation, and supporting excellence in service delivery.

### LEADERSHIP

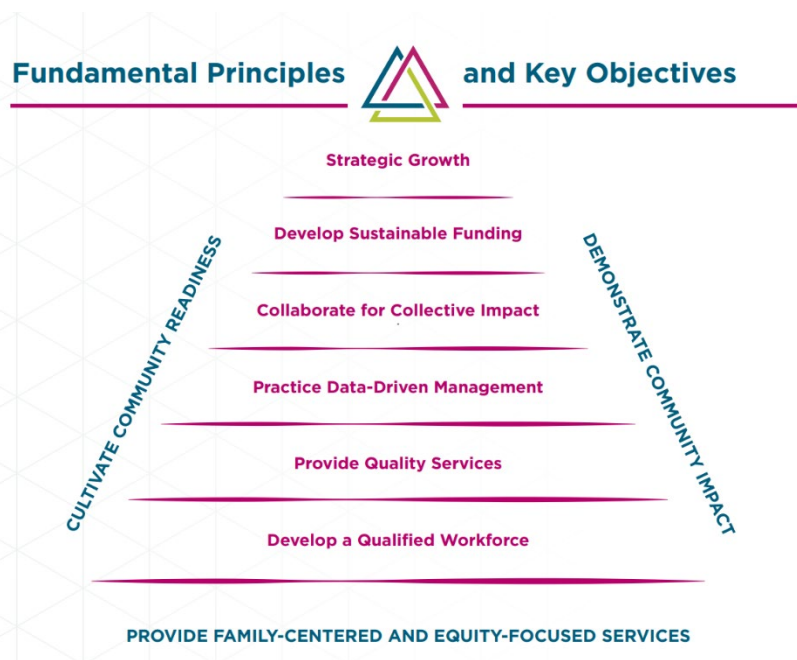
The Early Impact Virginia Strategic Plan, published in January 2022, provides the context and direction necessary to fully operationalize the Commonwealth’s *Plan for Home Visiting*.

Virginia’s *Plan for Home Visiting*, adopted in 2019, addresses the Commonwealth’s key priorities for pregnant persons and families with young children and sets a bold strategic direction for growing services to achieve collective impact. Informed by the Early Impact Virginia statewide home visiting needs assessment, and with input from more than 200 stakeholders at the local and state levels, the strategic plan provides the blueprint for ensuring quality and efficiency while building the statewide capacity for scaled growth.

Collectively, stakeholders identified the fundamental principles and key objectives upon which *Virginia’s Plan for Home Visiting* is grounded. These fundamental principles were informed by the shared values and priorities of Virginia providers and leaders, including:

- Provide **family-centered** and **equity-focused** services.
- Cultivate community **readiness** for expanding home visiting.
- Demonstrate community **impact** of home visiting.

With the publication of this plan, Early Impact Virginia clearly articulated both the vision for early childhood home visiting in Virginia as well as the organization’s role in leading this work.



## Early Impact Virginia: The Organization

Established more than fifteen (15) years ago as the Home Visiting Consortium, Early Impact Virginia's role has evolved in recent years from informal collaborative to statewide leader. Charged by the Virginia General Assembly in SFY'19 with the authority and responsibility to:

- determine, systematically track, and report annually on the key activities and outcomes of Virginia's home visiting programs;
- conduct systematic and statewide needs assessments for Virginia's home visiting programs at least once every three years; and
- to support continuous quality improvement, training, and coordination across Virginia's home visiting programs on an ongoing basis

Early Impact Virginia is successfully executing across this charge. However, limited resources combined with a fragmented statewide system and strict funding requirements necessitates prioritization to ensure the greatest return on investment.

To fully live into its mission and charge, Early Impact Virginia must remain a strong, viable organization capable of building and sustaining progress over time. To accomplish this, Early Impact Virginia established a Board of Directors and became a 501c3 non-profit organization during the last year. With a bold mission and a deep history of collaboration, Early Impact Virginia continues to capitalize on well-established partnerships that allow the organization to focus on mission while building the organizational structure. To that end, Early Impact Virginia continues to receive fiscal sponsorship through Families Forward Virginia. Embraced by the inaugural Board of Directors, this mission driven approach supports deep commitment to the work and to addressing the systemic change necessary to achieve the strategic vision that all pregnant and parenting families have access to high quality, early childhood home visiting services when and how they choose.

Led by Board Chair, Elizabeth Whalley Buono, the Early Impact Virginia Board of Directors:

<b><i>Lisa Carter, NE-BC, FABC</i></b>	Southern Market President, Ballad Health
<b><i>Ashley M. Edwards, MHDS</i></b>	Americares, US Programs, Health Equity Strategy
<b><i>Ashley Kenneth, MSW</i></b>	President & CEO, The Commonwealth Institute
<b><i>Cynthia Morrow, MD, MPH</i></b>	Health District Director at Roanoke City and Alleghany Health Districts Assistant Professor, VA Tech Carilion School of Medicine & Research
<b><i>Bergen Nelson, MD, MS</i></b>	General Pediatrician and Child Health Services Researcher, VCU Early Childhood Champion, Virginia-AAP
<b><i>Cynthia Romero, MD</i></b>	Director, M. Foscue Brock Institute for Community & Global Health at EVMS
<b><i>Elizabeth Whalley Buono, RN, MBA, JD</i></b>	Chief Legal Officer and Chief Compliance Officer at PHLOW Corporation
<b><i>James D. Worsley, Ph.D.</i></b>	Deputy County Manager for Human Services, Chesterfield County

## COLLABORATION

Collaboration is fundamental to all EIV work. Home visiting is a complex system that includes multiple program models and numerous partnering organizations. Extensive coordination is necessary to support effective communication and decision making to ensure that our system is responsive to the needs of families and communities while also addressing the Commonwealth's key priorities and supporting strong outcomes.

### Alliance for Early Childhood Home Visiting

Early Impact Virginia leads the Alliance for Early Childhood Home Visiting. As both a convener and partner in implementation, EIV has well established relationships at the local and state level. Member organizations represent an early childhood workforce of nearly 600 providers serving over 7,000 children in 123 of Virginia's 133 localities. In addition to this reach, through the Alliance for Early Childhood Home Visiting, EIV partners closely with early childhood providers across the system, including early intervention, preschool special education, infant/early childhood mental health, substance use services, early care and learning, child welfare, food/income security, health care providers, insurers and academic institutions.

Key to any EIV led project or activity is the engagement of those in the field. To be effective, EIV must represent the entire field in meaningful, relevant ways. EIV relies on the expertise of local providers and stakeholders as well as state leaders in all of its work. Alliance Workgroups provide the vehicle for including provider voice in decision making. Early Impact Virginia sets the course and partners with the Alliance to advance statewide priorities.

As EIV has assumed a greater role leading statewide efforts, defining the role of the Alliance in decision making assumed greater importance. This became particularly apparent as EIV initiated work with the Alliance to develop the workplan to support key strategic objectives. Before co-creating the work plan, the Alliance prioritized the need for organizational restructure and role clarity. EIV engaged a consultant and developed a workgroup to lead these efforts. The recommended changes in structure and role will be fully implemented in the new fiscal year as the Alliance officially becomes the Advisory body for Early Impact Virginia.

As this work continues to evolve, EIV is building new opportunities for provider and partner input while also creating communication and accountability measures to ensure that all stakeholders are able to engage in and have full access to work activities and work product.

To further center family voice and engage impacted persons in decision-making and policy development, EIV is building a Home Visitor and Parent Expert Panel. Part of the EIV Alliance, the Home Visitor and Parent Expert Panels are designed to inform and guide statewide home visiting programming and policy. Parent participants are recruited for panel membership through the Home Visitor Expert Panel and all work is coordinated by dedicated EIV staff. As a necessary first step, the workgroup is collectively determining Expert Panel structure and function, including:

- Expert Panel Structure: membership criteria, membership term, committee size, meeting frequency, reporting, compensation
- Goals and objectives
- Roles and Responsibilities

Once this preliminary organizational work is completed, the Expert Panels will meet regularly to address policy and service-related items identified by panel members and as a part of Alliance workgroup activities.

In the meantime, EIV continues to lead all Alliance activities while developing and executing the work plan to support the objectives as defined in the Strategic Plan. To fully support communication across an extensive stakeholder group, EIV will post progress on strategic objectives via quarterly Work Plan updates on the EIV website.

## MIECHV


Early Impact Virginia partners with the Virginia Department of Health to collaboratively lead Virginia's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program. EIV and VDH work closely to fully align home visiting activities to support all home visiting providers in the Commonwealth. Leveraging the legislatively directed role of EIV, Virginia is working to create a seamless approach to supporting the needs of local programs by standardizing expectations, reducing administration burden and maximizing resources for workforce development and continuous quality improvement. The collaborative MIECHV team includes the VDH MIECHV team, EIV team and funded program model leads. This team meets monthly to guide decision making, enhance coordination and streamline activities.

Currently, MIECHV funding supports twenty-one (21) local implementing agencies serving more than 1,000 at-risk pregnant women and families with young children in 40 communities. Additionally, 1 local agency, Smart Beginnings Virginia Peninsula, receives funding to implement behavioral health risk integrated centralized intake services in both Hampton and Newport News and supports these services in an additional seven communities in Eastern Virginia, as needed.


In December 2022, Congress reauthorized the MIECHV program for the next five years. As part of the reauthorization, MIECHV funding doubles by 2028. Along with this additional funding comes a new twenty-five percent (25%) match requirement. This is the first match requirement for MIECHV. Virginia's ability to fully leverage our state's share of the federal allocation will require contribution of approximately \$1.7M in non-federal funds over the next four years. To allow states time to prepare for the new match, each state's base funding rate was increased in year one and does not require a match. Virginia's new base funding increases from \$7.712M to \$10.855M. Increased funding for local programs will be made available in FFY'25, providing ample opportunity for EIV to update the 2020 Needs Assessment to reflect changes in community needs, readiness and capacity for home visiting services.

## Communication

Early Impact Virginia maintains a statewide and national email list of more than 2,000 subscribers, including home visitors, supervisors, and other stakeholders.



**NEW Home Visitor E-Learning Module Available!**



Let your team know we have a NEW, important home visitor module available now in the Institute!


**Practicing Personal Safety While Partnering With Families**  
This 50-minute module covers how to prepare for a visit, how to maintain personal safety before, during and after a visit, and how to respond should you encounter unique safety situations, as well as ways to avoid them. Effective self-care techniques and program responsibilities are also discussed.

[LEARN MORE](#)

**EIV Presents Reflective Supervision 3.0**

When Reflective Supervisors were asked about what they want from RS 3.0, we listened. Comments included: "The opportunity to be real and honest about the challenges of this work with others who get it." They wanted more stories from others about what has worked in responding to challenging situations from their staff. Supervisors said they liked having a place where they could "get support since they don't always have that within their organization."

Well, we heard you... JOIN US for 3.0!



**What is it?**  
An opportunity for Reflective Supervision 2.0 alumni to be together to continue building their community and receive support in their role as a reflective supervisor.

**What is the commitment?**  
We will hold four virtual calls and 2 in-person day-long sessions. The current schedule is:



Regular communication is maintained via two message-specific newsletters that include EIV sponsored events and activities, as well as relevant information and updates for the field and information specifically for home visiting Supervisors. The Supervisor newsletter shares upcoming training opportunities and information of particular importance for supervisory staff. Social media communication became even more prevalent over the course of the two years. EIV provides regular Facebook and Instagram posts of current events and relevant resources. Social media posting has also offered many new opportunities to share local provider success stories and celebrations.



*Hopewell/Prince George Healthy Families Team meet with Delegate Carrie Coyner. ~Home Visiting Day 2023*

Early Impact Virginia continues to lead public awareness and advocacy efforts to educate elected officials about the role and impact of early childhood home visiting. After several years of virtual Parent Town Halls that included elected officials, EIV partnered with Families Forward Virginia to host a home visiting Advocacy Day in 2023. Using existing EIV universal public awareness materials, a statewide postcard campaign was developed to share the very real impact that home visiting has in communities throughout the Commonwealth. Participating home visiting families wrote messages about the impact that home visiting has had in their

lives. More than **500 postcards** were completed by home visiting families and delivered directly to legislators.

On January 19, 2023, nearly **150 home visiting advocates participated in Home Visiting Day at the Virginia General Assembly**. To reinforce the postcard messages, 40 Families and more than 100 home visitors from all over the Commonwealth shared their stories with their representatives—stories of parenting challenges and triumphs, but most importantly the ways that home visitors are always there to support, encourage and celebrate together with families and for families.



### What Our Families Are Saying...

*"They truly have helped me keep up with my child's milestones, as well as make sure I'm always well enough to take care of my son... I can honestly say they have saved my son and I's life more than once."*

Savannah, Collinsville Virginia

## INNOVATION

From the start, home visiting program models have been built on evidence and have used data to drive improvement. Collecting reliable data is essential to accountability, quality assurance and improvement. Early Impact Virginia recognizes the value of defining and collecting common data across all programs and worked together with service providers and funding partners to develop unified data measures and reporting structures to share the impact of our work. See pages 7 - 8 for FY'22 statewide outcome and service data.

### Annual Data Collection and Reporting

For the last five years, EIV has partnered with local providers to collect program level data to demonstrate the scope and impact of service delivery. Annually, 56 local organizations voluntarily report data to EIV for shared reporting. Our focus has been to conduct this work in a way that is manageable for local program providers while also informing broader goals to streamline reporting, ensure accountability, demonstrate impact and frame our story. In addition to collecting data directly from local providers, EIV partners with Early Head Start/Head Start state leaders to gather as much relevant data on the 14 local programs providing home-based services in Virginia communities. This process is hindered by the federal funding structure and reporting requirements that do not fully align with Virginia's definitions and needs. However, the organizations are able to focus efforts to get the best data possible to describe the home visiting system and understand the overall needs of families receiving services. This allows EIV to provide a comprehensive snapshot of the families and communities receiving home visiting services. Future goals include integration of this data into the Virginia Home Visiting data set to be able to report impact across all measures.

In addition to service data, EIV and Alliance members identified a number of areas where additional data could be collected to better inform our shared understanding of emerging trends and issues. In particular, to better understand workforce recruitment and retention challenges, EIV added the collection of salary data to better understand variation in compensation across localities and program models and roles. See page 11 for additional information.

### Early Impact Virginia Data Warehouse

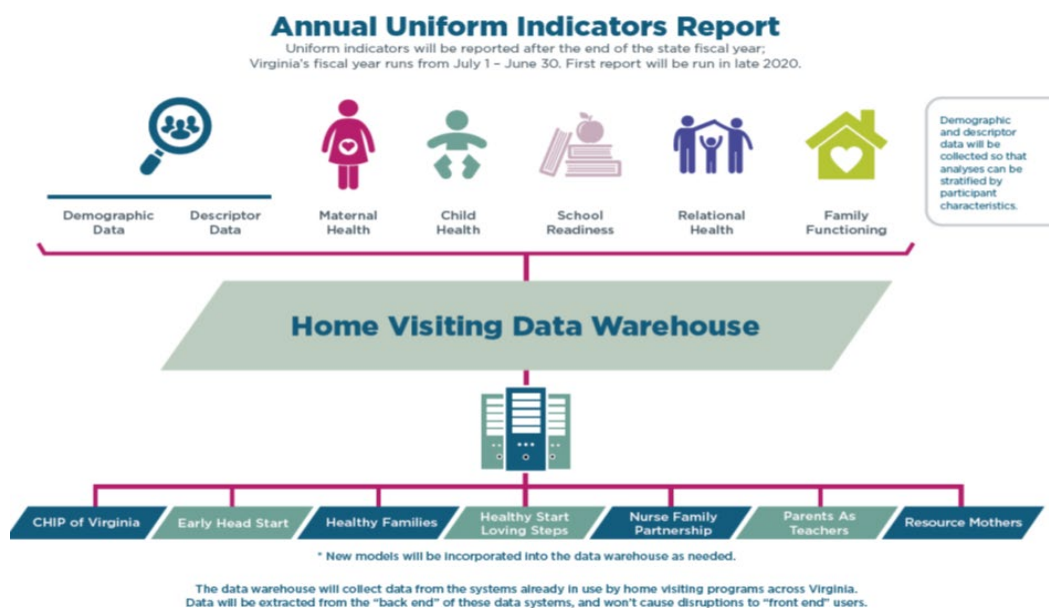
State leaders have long been committed to easing the data burden on local providers while ensuring accurate reporting and the use of data to demonstrate impact and drive improvement. To achieve this goal, EIV prioritized building a data warehouse to automate reporting across models. Rather than create new data collection systems that require provider input, EIV imports data into the data warehouse from program model legacy data systems, analyzes the data and reports in aggregate across all program models. This complex, but efficient strategy was designed to specifically reduce the reporting burden on local home visiting providers while building capacity to fully illustrate impact of home visiting across a number of key indicators.

In 2022, EIV completed the technology build for a statewide data warehouse and successfully integrated Healthy Families Virginia data for MIECHV and EIV Annual Reporting. As the largest home visiting provider in Virginia, this represents significant progress towards achieving the statewide goal to automate shared reporting. In addition to successful annual reporting, a quarterly quality assurance process is in place to support local programs. Working together with

Healthy Families Virginia Team and local ‘super-users’, EIV facilitates quality assurance through quarterly data pulls and site-specific technical assistance to ensure complete and accurate data.

This year, EIV partnered with the Virginia Parents as Teachers (PAT) office and the PAT National Center to complete the data build to ingest local PAT program data for MIECHV and EIV Annual reporting. This effectively eliminates the need for a separate MIECHV data collection and reporting system and will support one time data entry and reporting for all Healthy Families and Parents as Teachers programs, representing **85%** of the MIECHV caseload and **more than 50%** of the statewide home visiting services delivered. This represents significant progress towards achieving the statewide goal to automate shared reporting and allow for full integration of data from each of Virginia’s eight home visiting models with relevant statewide data systems.

With the warehouse built and fully functional, future work will focus on ingestion of outstanding program model data to support a comprehensive data solution. This task remains quite extensive as success requires complex agreements and significant coding for each data system to ensure accurate reporting. Prioritization of this work is essential and investment in future system builds will be based on cost-benefit analysis and provider readiness. In addition to streamlining data collection and improving data accuracy and accountability, this work is advancing Virginia’s goal to integrate home visiting data with other state early childhood data sets.



EIV’s Data Action Team, with representation from program models, evaluators and local providers, continues to work to develop shared priorities. Over this past year, much of this team’s work focused on preparing for Annual Data Collection and identifying workforce data to address key priorities. The team has identified the following projects for future shared work:

- Virginia Home Visiting Report Card
- A Collaborative Home Visiting Evaluation Report

EIV remains committed to sharing statewide home visiting data to support accessibility for all stakeholders. All data reports and data illustration is accessible on the EIV website Data page and is used to maintain a statewide Directory of Home Visiting service providers to support local referrals and connections.

## EXCELLENCE

As a relationship-based service, developing and retaining a qualified workforce is fundamental for sustaining and growing home visiting. Essential for all workforce development activities is the need to promote diversity, effectiveness, and retention. To do this, Virginia leaders have prioritized the application of competency-based standards, optimization of recruitment and retention strategies, and the intentional development of career ladders with competitive compensation systems.

Home Visiting workforce retention is highly predicated on two things, passion for the work and compensation. Virginia has a proud history of supporting staff wellness and job satisfaction among home visiting programs. Coming out of the pandemic, EIV prioritized staff wellness through coordinated efforts to foster and further develop *Joy In Work*. These efforts have been woven through all EIV activities during the last year and are detailed throughout the remainder of this report.

Current challenges with home visitor recruitment and retention are largely due to low wages and a lack of opportunity for career advancement and pay increases. With flat funding and increasing needs, addressing workforce compensation presents greater difficulties. To inform this work, Early Impact Virginia completed a statewide home visiting salary study to better understand salary ranges across program models, geographic regions, and provider qualifications. As a next step in developing the home visiting career ladder, this data will be used by Virginia leaders to develop minimum salary recommendations, including pay increases and higher starting salaries for Certified Home Visitors.

Virginia offers competency-based training and national certification through the *Institute for the Advancement of Family Support Professionals* and classroom-based experiential, advanced learning activities. EIV is conducting a yearlong certification pilot project by providing group and individual supports to promote successful completion of the certification exam. To learn what types of support home visitors want and are most effective. Participating home visitors will receive professional and peer support, stipends for participation and the opportunity to complete the certification exam free of charge.

Additional workforce development strategies currently underway include cross-training and certification opportunities with partnering service provider systems, e.g., early intervention, lactation consultants, doulas, community health workers, peer recovery specialists and so forth. Each collaborative strategy supports the overall goal of staff retention through growth opportunities within the field rather than movement to similar positions outside of the home visiting system for higher pay. EIV will continue to lead this work with Alliance partners as part of a shared approach to workforce development and systems building.

### Day of Learning 2023

For the first time in four years, EIV brought together home visitors for a day long conference. The theme of the 2023 Home Visiting Day was *Joy in Work*--a celebration of the deep passion and commitment that is Virginia home visiting. The day was all about taking care of our home visiting providers, honoring them and reminding them just how important they are to their communities and families served.

Dr. Danny Avula, VDSS Commissioner, kicked off the day by welcoming almost 300 home visiting professionals and partners. In addition to three plenary sessions, 15 workshops were offered for attendees in both the morning and afternoon. To further support our goal that all attendees feel nurtured, loved and supported, conference marketing, materials and decorations represented the overarching theme of *Joy in Work*.

Two special activities were highlights during the day. EIV brought in a graphic illustrator to capture the key messages of the day (see below). And, EIV partnered with Sylvia's Sisters to distribute over 34,000 pads to local home visiting providers. From southwest Virginia to the eastern shore, hundreds of menstruators will get the supplies they need through their local home visiting program.



EARLY IMPACT VIRGINIA - STATEWIDE CONFERENCE - MAY 2023

EIV is very proud to have been able to provide a forum for providers to be together and to celebrate all that is home visiting. And, we are equally proud of just how successful we were. Check out a couple of quotes from participant evaluations:

*"I was truly blown away by the speakers and I wish I could have attended all of the breakout sessions."*

*"I enjoyed having a learning day as well as a day to get back some of the motivation and reassurance in the importance of the work we do."*

*"I loved getting the opportunity to see my "folks" in person again after such a long time!"*

*"The speakers were excellent. I had a hard time choosing which breakout sessions to attend because they all seemed so interesting and the speakers did not disappoint. I was so impressed and have told several people that this was the best conference I've ever attended."*



## Competency-Based Professional Development

One of the most fundamental roles that EIV plays in supporting the home visiting system is through professional development. A national leader in this work, EIV continues to partner with the

Iowa Department of Public Health to offer a comprehensive, competency based professional development system for home visitors and supervisors, the [Institute for the Advancement of Family Support Professionals](#) (The Institute).

The Institute is an innovative effort to advance workforce development nationwide and streamline the home visitor experience. With the development of new modules and the updates to outdated modules, EIV now offers 81 e-learning foundational training modules. In addition to supporting core competency development through on-line training, EIV also offers seven (7) advanced classroom training for Virginia home visiting professionals in all parts of the state. All EIV trainings are specially designed for home visitors and are developed together with early childhood partners, experts and local providers. All trainings are available at no cost and accessible regardless of provider location.

The Institute is continuing to build features to support workforce development through a robust system of support, including

- Individualized digital learning maps,
- National Certification,
- Digital Badging for Specialized Skill building,
- Undergraduate degree credit at greatly reduced cost (University of Kansas),
- CEU credits (James Madison University), and
- Reciprocal agreements with certifying organizations like the CDA for Home Visitors.

## Building the Home Visitor Pipeline

In April 2022, Virginia Department of Health, together with the Iowa Department of Public Health, was awarded a MIECHV Innovation grant to advance our shared workforce development efforts. Through the *Building Equitable Career Pathways in Home Visiting* project, the Institute will create a parent pathway into the field, enhance access for Spanish speaking professionals to competency-based professional development training, resources and National Certification, add new competency-based training for home visiting Supervisors and develop resources to support organizations to recruit and retain a changing workforce. All of these efforts will be informed by the field and by home visiting participants. In partnership with the JMU Health Education Design Group at James Madison University, EIV will lead these efforts for Virginia and will develop a Virginia Home Visitor Expert Panel and a Parent Expert Panel to guide and inform the work of this project.

EIV has collaboratively determined existing module content for update and translation. Using the process piloted for the development of Spanish Virtual Home Visiting modules, EIV is developing nine (9) e-learning modules in Spanish and 10 Supervisor e-learning modules to support the National Family Support Supervisor Competencies and Certification exam.

The Alliance prioritized the update of competency-based content areas to address new guidelines, changes in best practice and overall dated information, language or imagery. In 2023, EIV produced three e-learning modules to meet Virginia home visitor needs.



**Child Development, Ages 3-5** provides an overview of typical child development for children ages three through five. With this knowledge, family support professionals will have the tools and information they need to talk with parents about typical and atypical development, educate parents about how they can support their child's development, and learn skills for talking parents about the need for early identification of delays and disabilities.

**Confidentiality: The Bridge of Trust** introduces the laws of confidentiality and their importance in building trusting and respectful relationships with families. It provides an overview of best practices for family support professionals to protect client confidentiality and the professional and ethical considerations within home visiting and virtual home visiting.



**Practicing Personal Safety While Partnering with Families** covers how to prepare for a visit, how to maintain personal safety before, during and after a visit, and how to respond should you encounter unique safety situations, as well as ways to avoid them. We will also discuss effective self-care techniques and program responsibilities.

## Virtual Home Visiting

Early Impact Virginia continues to partner with National Home Visiting leaders on behalf of *The Institute* to develop e-learning best practice Virtual Home Visiting training and supports. Through the Rapid Response project, Early Impact Virginia supports an on-going national home visiting webinar series and the development of best practice resources, including the Virtual Home Visiting e-learning module series and Supervisor Toolkit. Over the last year, EIV has led work to completely translate and develop all resources in Spanish. EIV has designed a process to support cultural interpretation of all materials, rather than simple translation. This experience and the process developed to support the work is informing current competency-based Spanish module development as a part of the MIECHV Innovation grant. With the adoption of Virtual Home Visiting service delivery and protocols, these resources provide the nationally recognized training and endorsement. When all six modules and quizzes are completed, the home visiting professional will earn a Virtual Home Visiting Digital Badge that will be added to their online transcript in The Institute.



Virtual Home Visiting

*"This training was amazing! I was learning things I never knew."  
~Virginia Home Visitor*

## Advanced Professional Development

EIV continues to provide advanced skill building through live training, coaching and technical assistance. To continue to meet the needs of staff throughout the Commonwealth during the pandemic, Early Impact Virginia completely transitioned all classroom-based training to a virtual format and provided virtual training throughout the year. EIV offers each of the following trainings on a regular basis throughout the year. To meet the needs of all home visiting staff, live training will now be offered both virtually and regionally, in-person throughout the Commonwealth.

- **Adult Mental Health Learning Lab**
- **Motivational Interviewing for Home Visitors**
- **SBIRT for Risky Health Behaviors**
- **Healthy Moms, Happy Babies with CUES**
- **Working with Pregnant and Parenting Teens**

*"The facilitator was excellent!! She is obviously extremely knowledgeable and skilled yet was clear, approachable and affirming."*  
~Home Visitor

In SFY' 23, EIV conducted **20 ClassZoom events for 426 home visitors.**

## Mothers & Babies Evidence Based Curriculum

Early Impact Virginia worked with Northwestern University to launch Mothers & Babies in Virginia in 2020. This evidence-based curriculum is designed specifically for home visitors to use as a prevention and/or intervention strategy to address mild to moderate perinatal depression. Mothers & Babies has been highlighted as one of the most effective interventions for the prevention of postpartum depression and EIV is working together with partnering programs to provide this training to every home visiting program in Virginia. To date, 30 local programs have received training and technical assistance to support effective implementation of the Mothers & Babies intervention. This intervention was particularly important over the past three years as families exhibited much higher levels of anxiety and mild to moderate depression due to the uncertainty and stress of the three pandemics. Early Impact Virginia has also developed a statewide, technical assistance infrastructure to support long-term sustainability of the intervention among participating home visiting programs and looks forward to training a new cohort of local providers in the upcoming year.

*"I loved breaking out into group sessions where we further discussed concepts. I enjoyed how engaging the entire training was!"*  
~Program Supervisor

## Supervisor Supports

Early Impact Virginia continues to work in partnership with the Early Childhood Mental Health Virginia state office to provide intensive Reflective Supervision training for home visiting supervisors to build reflective supervision skills, infant mental health knowledge, and opportunities for Virginia Infant Mental Health Endorsement.

Throughout the course of the pandemic, one recurrent request expressed by home visiting staff has been the need for additional supports for staff well-being, self-care and reflective practice. In particular, in Virginia, the need for support for supervisors has been critically lacking for some time. Virginia training and supports for home visitors is quite robust, but professional support for supervisors has yet to be fully developed or implemented. A supervisor's ability to



effectively support staff during the COVID-19 pandemic has been the greatest predictor of staff satisfaction, effectiveness and retention. As the linchpin for staff retention and effective service delivery, it is imperative that supervisor well-being is prioritized, supported and nurtured.

Early Impact Virginia partnered with program supervisors to specifically develop a continuum of training and support to fully implement reflective supervision training and support for all supervisors, regardless of experience level or time in the field. Building upon the Reflective Supervision three-part e-learning series launched last year, EIV developed a complementary synchronous training to support newly hired supervisors prior to enrollment in the more intensive Learning Community. In January 2023, EIV launched *RS 1.0: Introduction to Reflective Supervision Learning Lab* training to support new supervisors to develop their understanding of reflective supervision and practice.

**"The shared experience,  
knowing I am not alone..."**

In September 2022, EIV launched an eighteen-month Reflective Supervision Training and Learning Community (RS 2.0) with twenty-four (24) program supervisors representing 6 Virginia models. All supervisors are encouraged to participate in this intensive, highly supportive learning community. The EIV Learning Community approach is a 'closed community' and incorporates the expertise of both seasoned mental health trainers and peers to lead training and coaching activities. This approach is designed to not only support participating supervisors, but to also build the long-term capacity for support across organizational teams to ensure full integration of reflective practice. Through a combination of quarterly in-person training and monthly virtual reflective group sessions, supervisors build their knowledge of infant mental health theory and strategies and increased their reflective supervision skills. Four "Lead Supervisors", graduates of previous cohorts, facilitate group reflective supervision sessions as a way to continue building their own reflective supervision skill and to expand reflective supervision leadership and capacity across Virginia. This cohort has also included an increased focus on issues related to diversity and equity, with a goal of equipping supervisors to engage in and advocate for diversity-informed and inclusive practices within their own organizations.

Responding to the needs of graduates of RS 2.0 became imperative following the pandemic and a top priority for EIV. To address these needs, EIV is launching RS 3.0 in the Fall 2023. To best meet the needs of these seasoned professionals, EIV will co-create content together with group members. To begin, EIV will provide regular Mindfulness Training and Support Sessions for Home Visiting Supervisors. In true parallel process, a trained mental health clinician and trained home visiting peer professional will co-facilitate in-person and virtual sessions. Initially, these small group sessions will be open to all supervisors and administrators who have completed the Reflective Supervision Learning Community. EIV will work with supervisors to identify specific needs (mental health consultation, training, self-care activities, peer sharing, and so forth) to ensure personalized/relevant approaches are implemented.

This comprehensive plan to support all supervisors, regardless of experience, model or location, will be implemented as a top training priority to support home visiting staff as they continue to navigate rapidly changing professional expectations and family (client) needs.

## Continuous Quality Improvement: *Joy in Work*

Virginia is very proud of the commitment state leaders and local providers are making to continuous quality improvement. A key tenet of the MIECHV program, Virginia has worked to spread continuous quality improvement (CQI) across the entire statewide network of programs by coaching state model teams to support their local programs in implementation and by encouraging non-MIECHV sites to join this year's CQI Learning Community focused on *Joy in Work*.

*Joy in Work* is the Institute for Health Improvement (IHI) Framework designed to address increasing burn-out and staff turnover among health care providers. IHI describes joy in work as “more than just the absence of burnout or an issue of individual wellness; it is a system property.” The Joy in Work framework supports organizations to “engage in a participative process where leaders ask colleagues at all levels of the organization, ‘What matters to you?’—enabling them to better understand the barriers to joy in work, and co-create meaningful, high-leverage strategies to address these issues.”

In addition to the 21 local sites participating in the *Joy in Work* activities, four (4) local programs are participating in the HRSA sponsored HV COIIN (Home Visiting Collaborative Improvement and Innovation Network). These programs engage with peers from across the nation in an intensive learning experience to improve staff recruitment and retention. Additionally, one local program is participating in the HRSA sponsored CQI Practicum to improve their overall understanding and application of CQI strategies. Our CQI Coordinator is not only leading the *Joy in Work* learning community, but also provides one-on-one consultation to each program and model TA providers while also fully participating in both the HV COIIN and Practicum, supporting the individual and collective needs of 26 local programs.

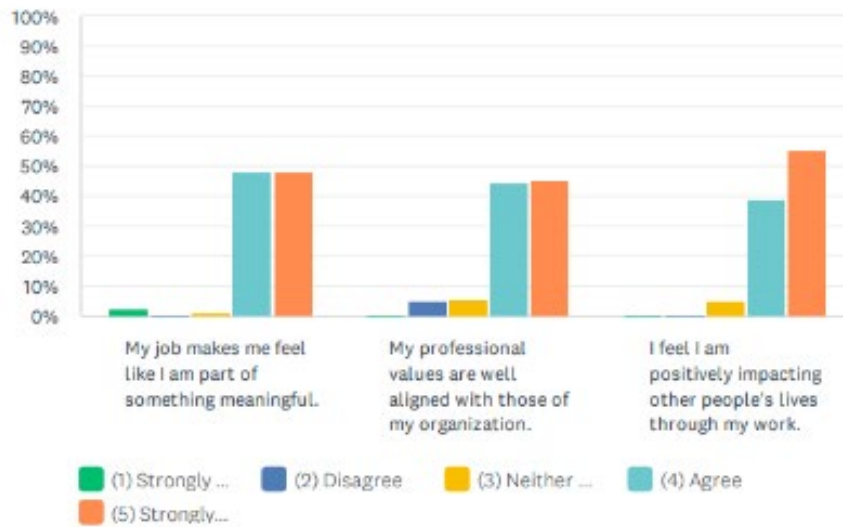


EARLY IMPACT VIRGINIA - STATEWIDE CONFERENCE - MAY 2023

At the beginning of the year, local programs overwhelmingly voted to focus their efforts on promoting staff well-being by intentionally incorporating more joy into their work. As part of the Continuous Quality Improvement (CQI) Learning Community, these teams are having conversations about what matters most to them and what stands in the way. Teams make improvements by testing out new strategies or adding more of what is already working.

To inform the work of the learning community, data is gathered each month via a Virginia specific survey. With 154 responses from the first survey to get a pulse on joy in work here is what we learned:

Home Visitors and Supervisors are in this work for a reason! They feel deeply connected to the meaning and purpose in their work.



	(1) STRONGLY DISAGREE	(2) DISAGREE	(3) NEITHER AGREE, NOR DISAGREE	(4) AGREE	(5) STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
My job makes me feel like I am part of something meaningful.	1.95% 3	0.65% 1	1.30% 2	48.05% 74	48.05% 74	154	4.40
My professional values are well aligned with those of my organization.	0.65% 1	4.55% 7	5.19% 8	44.16% 68	45.45% 70	154	4.29
I feel I am positively impacting other people's lives through my work.	0.65% 1	0.65% 1	4.55% 7	38.96% 60	55.19% 85	154	4.47

To fully promote *Joy in Work* among all home visiting programs, the EIV Alliance Conference Committee adopted this as the theme for Virginia’s statewide conference. This theme carried throughout the day and made a tremendous impact on all attendees who reported feeling connected, nurtured and energized at the end of the day!

We also know there is still work to do around physical and psychological safety, staff wellness and resilience, and participative management. Teams are turning their attention to these areas and thinking about what improvements they can work on immediately. As an immediate first

step, our network has prioritized addressing the personal safety of all staff members, but most importantly home visitors. After hearing many concerns related to increasing rates of violence and health risk as home visitors re-entered communities following the pandemic, the MIECHV team prioritized efforts to support home visitor safety and approached this in two significant ways. EIV completely updated the Personal Safety Training e-learning module while simultaneously working to develop a Safety App for home visitors and supervisors. Both activities were informed and directed by home visitors and supervisors to meet their needs. The training module and Safety App were introduced at the EIV Day of Learning.



## What's Next?

The upcoming year promises to be just busy as the last as EIV continues to work in partnership to fulfill its mission and support sustainable growth to reach more Virginia families. While much of the foundation is in place, it will be particularly important for Virginia leaders to think and act strategically to build systemic approaches that support effective growth. Aligning new funding opportunities with existing structures will be critical for ensuring the most efficient and sustainable growth for local programs.

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**Home Visiting Works.**

Home visiting is proven to strengthen families and help children grow up healthy and ready to learn.

[LEARN MORE](#)

**Find Home Visiting in your Area.**

We ensure that all pregnant and parenting families have access to high-quality, early childhood home visiting through programs that best match their needs. See which home visiting programs are available in your community.

[FIND A PROGRAM](#)