Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Technical Assistance Coordinating Center's Webinar

"Strengthening Professional Development for MIECHV Programs"

September 25, 2012 3:00pm Eastern, 2:00pm Central, 1:00pm Mountain, 12:00pm Pacific

<u>Panelists:</u> Claire Dunham Janelle Weldin-Frisch

Susan Stewart: Welcome everyone. My name is Susan Stewart and I'm a Distance Learning Consultant for the MIECHV TACC at ZERO TO THREE. And this webinar is hosted by the Maternal, Infant, and Early Childhood Home Visiting Technical Assistance and Coordinating Center, the TACC.

And the TACC is funded by HRSA and it operates from ZERO TO THREE and is in partnership with Chapin Hall, AMCHP and WRMA. TACC is funded to provide many levels of technical assistance support to MIECHV grantees including webinars like this one.

And support from the TACC can be accessed through your HRSA regional project officers. So today's agenda is - we'll be discussing Strengthening Professional Development for MIECHV Programs. And Julie Ross will bring greetings from HRSA.

And Kathleen Strader from the MIECHV TACC will provide some introductory remarks about supporting a holistic approach to professional development for home visiting staff and supervisors.

Our presenters, Claire Dunham and Janelle Weldin-Frisch from the Ounce of Prevention, will be sharing three aspects of professional development for home visiting.

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First we're going to be looking at the role of professional development in home visiting and then they're going to be discussing the elements of an effective system for professional development.

And then finally, they will share some specific strategies about developing a system of professional development.

And then we'll have a little time for additional questions and then we'll provide you with some options for next steps with regard to supports that are available to your state as you continue to work on creating and sustaining an effective system of professional development for home visiting.

But before we get started I have a few little housekeeping items for you. And the first is that all of your phone lines will stay muted throughout the duration of the webinar. And for optimal sound quality we encourage you to call in using your phone instead of listening in on your speakers.

In addition, we've designed this webinar to be more interactive and so at different points you'll have an opportunity to participate in some polls.

And in addition, we're going to invite you to share your thoughts and questions via chat throughout the webinar, not just when we specifically ask you to share your questions or your thoughts.

We really invite you to type your messages into chat - your thoughts and your questions throughout the webinar even as presenters are speaking. And the chat box as you can see, is

located in the lower left of the webinar window where the gray arrow is pointing and to the left of the PowerPoint.

To post your comments in the chat box look on the screen there and you'll see the number one. You're going to type your comment in that text field and then be sure to click the arrow to the right of that text field or hit return/enter on your button or your keyboard so that everyone gets to see your post.

That will send your post up into that area that the arrow number three is showing. Finally, you should have received the PowerPoint slides for today's webinar via email if you registered by this morning.

However, if you did not receive them yet you will be receiving them out - after - they will be sent out to all of the attendees after the webinar so you will receive them at some point. And now it is my pleasure to introduce you to Julie Ross from HRSA. Julie, take it away.

Julie Ross: Thank you. Good afternoon and good morning. Thank you for joining us for today's presentation on Strengthening Professional Development for MIECHV Programs.

My name is Julie Ross and I'm a team lead for Regions VII, VIII, and IX in the Western Program Implementation branch of the Division of Home Visiting in Early Childhood Systems.

On behalf of my HRSA colleagues including our central office staff and our regional project officers in our ten regional offices, it is my pleasure to welcome our grantees and partners to today's discussion on Strengthening Professional Development for Home Visiting Programs.

First I wanted to acknowledge those of you who have not only committed your careers to the field of home visiting but have also spent large parts of your careers as home visitors yourselves.

Some of you listening today have decades of experience implementing home visiting programs and we all have a lot to learn from you.

Some of you are newer to home visiting but I think one thing is clear to everyone and that is that one of the key drivers of high quality home visiting programs are well trained staff.

MIECHV grantees have engaged in and continue to engage in diverse activities that serve to strengthen professional development in home visiting programs.

These include developing core competencies for home visiting staff, implementing standardized statewide training curricula for home visiting programs, formulating long term professional development plans for home visitors, considering trainings that cross borders and creating distance learning modules and systems.

Each evidence based model has a unique approach to home visiting staff training.

MIECHV grantees are engaged in activities that will help us learn more about how a comprehensive approach can reach staff across different home visiting programs and be relevant for home visiting staff with different professional and personal backgrounds and experiences.

We also look forward to hearing more about this today from our colleagues at the Ounce of Prevention. Again thank you and welcome on behalf of HRSA.

Susan Stewart: Thanks Julie. It's really wonderful to have HRSA representation and you're welcome. I'd like now to introduce you to Kathleen Strader. Kathleen is the Assistant Director of the MIECHV TACC.

And she's going to share some thoughts about supporting a holistic approach to home visiting professional development. And then she's going to introduce our two speakers for today. Kathleen?

Kathleen Strader: Thank you Susan and hello to everyone. We're really glad that you have all taken time out of your day to be a part of this webinar. This next slide is one that I'm sure looks very familiar to many of you and at least I hope it does.

We have used it in several previous webinars including one on Implementation Science in March,

Adaptive Leadership in April, on Supporting Home Visitor Competence in May and on Centralized

Intake webinar in June.

It depicts the implementation science triangle developed by Fixsen & Blase in their groundbreaking research on this topic.

Implementation science is I think such a wonderful organizing framework for our MIECHV work that brings into direct focus the key elements that are needed to ensure greater likelihood of positive outcomes for families when implementing evidence-based programs.

I think it goes without saying that MIECHV is complex, owing to the multiple layers of systems level work, the rigorous measurement requirements and the unique structure of each home visiting model.

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It is easy on some days to feel overwhelmed and maybe on other days you have felt like a dog

chasing its tail and wondering if you're making any forward progress at all. If so rest assured

you're not alone. And that's why the implementation science model is really great.

To me it's like an elixir that brings some level of simplicity and sanity and control to this work by

keeping our eye focused on the prize.

If you look at the top of the triangle it's all about how to effectively implement evidence-based

home visiting models in order to improve outcomes for children and families which in the case of

MIECHV includes improving the health - social, emotional, and physical and well-being of some

of our country's most vulnerable families and young children all of which can happen if we stay

focused on keeping these three legs of the triangle intact.

The research on implementing evidence-based practices has borne this out that if any one of

these legs of the triangle is unstable the stability of the entire structure - the entire system is at

risk.

And so the key is to understand that each leg of the implementation science triangle is a critical

component of your state level and community level program success.

And though this is not the venue to be able to talk in depth about each of the legs or drivers there

is something else I would like you to remember from the research literature.

While there's no question that organization drivers - these are - if you look on the right side of the

triangle - are important these are things - when we talk about organization drivers these are

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things like having clear and instructive policies, having appropriate funding sources, having organizational structures and cultures that support, value, and are committed to this work.

It includes having facilitative administrative support. This means support from ancillary divisions like finance, human resources, IT. All of these organizational drivers are important.

And equally important, if you look at the bottom of the triangle, are having capable leaders, decision makers and administrators that can effectively negotiate the technical and adaptive situations that confront them.

Being able to mobilize others into unchartered territory and leading with courage to challenge the status quo. All of what is - all of which is what systems change work is all about. They're all extremely important. None of us would doubt it for a minute.

But if you hear me now in the end all of these vitally important factors exert their influence on families indirectly.

It's only through, if you look at the left side of the triangle, it's only through our practitioners who competently use the core intervention components of the model in their interaction with families that we can achieve the positive effects of evidence-based models and programs.

So what - I think what one can easily assert is that the most critical functions of implementation consist of practitioner training, coaching and supervision including reflective supervision of the practitioner on the job.

Regularly assessing fidelity and using that information to improve the performance of practitioners who are carefully selected for their position. Just as a quick caveat though this particular webinar will not focus on staff selection, please remember and make a note in your hand outs if you need to that the capability of the implementing site to recruit and hire staff who possess the characteristics necessary to carry out this extremely challenging work, cannot be overlooked or undervalued.

Many of the models provide guidance on staffing characteristics that are critical to model implementation and you are encouraged - strongly encouraged to use them as a reference.

In the presentation today we'll be attending to all of the other elements of the leg of the triangle that you see in blue known as the competency drivers.

But before I introduce today's speakers I'd like to share one more visual model with you to further highlight how we support a holistic approach to professional development for home visiting programs in early childhood systems.

Now I like to call this one the big embrace. And if you look at it closely it looks like everyone is wrapping their arms around the home visitor, right? And that ought to be how it is in real life, not literally of course. We don't intend to crush our hard working home visitors.

But if we have attended to putting all of the supports in the right place not in ways that would be considered micro managing of programs and their staff because micro managing is in fact crushing and entirely the opposite of an embrace.

But if we can successfully accomplish the big embrace then we'll have accomplished the lion's share of what we just looked at in the implementation science model. But how do we know if we've wrapped ourselves too tightly or not tightly enough?

We should really be asking ourselves and our home visitors this on a regular basis. Do we have in place the big embrace? Or in other words, what more can we do? What additional resources can we bring to bear so that home visitors have what they need to do their best work?

And when we look closely and listen carefully to the answers to those questions we may be pleasantly surprised or we may find some unsettling news. Programs may not feel embraced at all. But either way what we learn - what we end up finding is that we're better for asking than for not asking.

And either way we'll be informed of how we can do things better and that truly is the objective. It keeps us all in a state of continual learning and isn't that what professional development is all about? Allow me for just a minute to revisit a little bit of history with you.

In May the TACC offered a webinar on supporting home visitor competence where four states shared their experiences and lessons learned including strategies that were being developed at the implementing site level and at the community and state level to increase coordination across agencies and systems and especially taking into consideration the need for cross model and cross disciplinary efforts.

That webinar, excuse me, was one of our most highly attended. And so today we are very pleased to be advancing our support to you on this topic and in partnership with the Ounce of

Prevention Fund in Chicago. As Susan mentioned at the start this webinar is designed to be interactive.

And that means you have a role over the next hour or so. Our presenters will be asking for your feedback on some specific questions. And in addition, you are encouraged to use the chat feature throughout the webinar to ask questions or make comments.

And we have some great folks working behind the scenes to compile these so that our presenters can respond to them at the appropriate time. So without further ado let me introduce our featured presenters now.

Claire Dunham serves as the Senior Vice President of Programs and Training for the Ounce of Prevention Fund.

In that capacity Claire oversees the administration of the Ounce's innovative work in the National EduCare program as well as overseeing a national - excuse me, overseeing a network of home visiting, doula, Early Head Start and Head Start programs across the state.

Claire also provides leadership for the Ounce's training and program development work. Janelle Weldin-Frisch is the Vice President of Training at the Ounce of Prevention Fund and leads the Ounce Institute that is designed for the professional development of early childhood professionals who implement evidence based programs to families with children ages birth to five.

Janelle's expertise includes staff development, adult learning and distance education and public administration in the early childhood and family support field. And at this time I'd like to turn the floor over to Janelle.

Janelle Weldin-Frisch: Thank you Kathleen. It's our privilege to be here today with you and everyone who

has joined onto the webinar.

As we move into this section of the presentation I will begin by saying that a great place to start in

building a professional development system for home visiting programs is to understand the

knowledge and skills that home visitors and supervisors need to be effective.

There are many resources for building that understanding - implementation science, the national

model developers, data on program fidelity and listening to home visitors and supervisors.

Our training work with over 300 home visiting programs in Illinois, has taught us to listen closely

to the experience of staff, to analyze data on key fidelity features and develop their training and

technical systems from that.

We're going to spend the next couple of minutes taking a look at the challenges that we have

found very common in working with programs, especially when implementing program fidelity.

First we're going to start with the learning objectives for today.

One of them is that by the course of our presentation we're hoping that you will have an ability to

identify the challenges faced by home visitors and supervisors in implementing MIECHV program

models with fidelity.

Secondly, we're hoping that you have gained an awareness of elements of an effective system of

professional development to address those challenges.

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Thirdly, that you will better know where to assess - access supports for developing a system of professional development for your own state home visiting program.

As I mentioned that this is a very challenging prospect, in our experience of working with programs they're - here are just listed five of the things that we have found as trends in themes.

The first challenge that we have identified that is commonly faced by programs is developing a goal directed relationship with families. Having a goal directed relationship with families is really central to the effectiveness of any intervention or prevention model.

Secondly, establishing trust and credibility is often a challenge faced by practitioners as well as programs in the context of their community.

Trust and credibility is foundational to the effectiveness of the use of relationship between home visitor and parent to foster change, to offer support and to keep focuses on services in that goal directed relationship with families.

A third element that we find as a challenge faced by home visiting programs is in supporting the parent/child relationship.

Keeping this a focal point is more than a notion and often one that is - can get lost in the mix in terms of its importance in engaging parent and services to be directed into outcomes of programs yet it too is foundational in the achievement of program outcomes.

The fourth one that we've identified is understanding the philosophy and approach of the particular home visiting model that they are using. While models have some differences in terms

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of philosophy and approach and sometimes in terms of methods in their requirements, they're it's essential that home visitors have a mastery and are working through the lens of the
philosophy and approach of the model that is being implemented in their community.

Another fifth challenge that we have found faced by programs and particularly practitioners is then using curricula and protocols effectively, very closely tied to the specific model being implemented.

These things together really require the home visitor to know and to remember why they're in a family's home. And that the purpose of that being in the home is to create a relationship for learning and growth in a setting that is not under their control.

One of the ways that I think about it is that the challenge combining keeping a focus on goal directed relationship, maintaining trust and credibility, a focus on the parent/child relationship and doing that through the lens of a philosophical approach in implementing models is really having a mastery of being a guest in someone's home with a clearly defined and embraced purpose.

Professional development clearly has a role to play in addressing some of these challenges by program.

But at this point we want to just take a pause and ask you to let us know about whether or not the challenges that we have encountered in working with programs through these last many years, resonate with your own experience and in the experience of programs and services.

So we're going to take a pause and ask you to provide some feedback to us. We're going to be asking you to use the link's feedback feature. You will find the feedback feature window to the left of the PowerPoint slide as indicated by the large gray arrow on the slide.

In the very next slide you will see which I'll put up in a second, you're going to see the poll question and the four answer options. When you are ready to indicate your answer to the poll simply click on the letter to the left of this letter representing your answer in the feedback box.

You'll be able to see the poll results for our collective voting in a few minutes. So let's take a look and do this poll for the first five challenges that I've just talked about. If you would see our poll question here is, have you encountered these challenges in your program?

Just take a few moments here and wait for your responses. It's always helpful for us to get a sense of the relationship of our experience with your experience in the field.

While we've done a lot of work in Illinois we know that some of these challenges will be unique to your own state's system, your own communities and certainly to your workforce of home visitors. So let's take a look and see. We'll just give you about another five seconds here.

So we're seeing a good indication that I would say about 25% of those that are answering are indicating that they've experienced about all of them. We have the majority of people that would indicate that some of these have certainly aligned with their own experience.

We do have a couple of folks that have - that these five don't resonate with and some that are just uncertain which my guess is, is probably a result of where they are in the system of support for home visiting programs. So I want to thank you for your participation in this first poll.

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We'll be doing another one in a few moments. Let's take a look at another set of challenges that I

would also say are common themes in terms of what are being faced by many programs, home

visiting programs. The first one would be managing safety and boundaries in the home and in the

community.

We find that that is often a challenge especially to practitioners who may be working in a variety

of settings whether that be in inner city kinds of settings or in rural settings. It seems that every

family's setting presents some challenges regarding safety and boundaries.

Secondly, ensuring home visiting frequency and duration is happening in the prescribed intensity

of the model. So that's often a challenge that we hear from supervisors in terms of working with

staff.

And we all know, especially in these programs, that given the level of outcome, achievement

expected of these services that intensity is a key factor in success. A third one would be accurate

and timely documentation.

And one of the - our observations is that we're hiring folks to work with families who often are

more interested in what is happening in interaction than what is recorded on paper.

So documentation and certainly as our state plans are indicating, or beginning to evolve in terms

of what all is required with documentation, this can create a challenge for our practitioners -

handling high risk situations.

And we've listed some examples of the most common ones that we know are challenging especially for practitioners in working with families.

And handling the high risk situations associated with substance abuse, with mental health including perinatal depression, domestic violence and working with parents who are facing developmental challenges are often what we've seen that present challenges to home visitors for putting in place that big embrace when it comes to parent and child in a family setting.

So at this point I see that we have a couple of chats that we just want to take a look at. We want to thank you Janet for adding a couple of your comments to the list, certainly personal and professional boundaries and establishing trust and credibility is not only related but a major issue.

We'll be collecting more and asking for your contributions as we continue to move forward. We're going to do one more poll in the same way that we did focusing on these additional four areas and move to the next slide. I'm having technical difficulties here. No. I'm off the link.

So go ahead and let's use your next poll. Someone will need to move my slide for me. Very good. So let's take a look at the poll question. Have you encountered these challenges in your program?

Please go ahead and vote at this time. A for all of them; B for some of them; C for none of them; and if you're uncertain that would be fine to indicate as well.

So while we're waiting for people to finish up their voting sequence we'll ask that you also take a few moments to think about what specific words you would add to our list or phrases describing challenges that we have not covered so far.

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So I can see from our polling here that we have a lot more people that are indicating that these

next four that we have talked about resonate with their own experience. I want to thank you for

voting there.

We - it appears to me that we're pretty much on the same page in terms of what we're seeing

across the board and want to keep pursuing this line of discussion among us. I want to encourage

you to let's move to the next slide. Moving to a chat feature - oops, let's back up just a second.

Okay, implementing MIECHV programs with fidelity let's take a moment and ask that you would

add to this discussion. We are very interested in continuing our own learning experience, believe

that what you're seeing in your own communities have much to add to our list and our

understanding.

We welcome this dialogue in the context of this webinar and that this is actually an example of a

continuous learning experience really for all of us by hearing from each other. So if you go ahead

and type your comments in the chat box you can post it into the text field at the bottom of the chat

area.

Be sure to click send or hit the return/enter button on your keyboard to ensure that your response

is coming up in the public area. We'll give you about another ten seconds or so if you want to type

in what your experience has been and to add to our collection of challenges.

Okay. I see that we have some folks that are talking about retention issues, retention of families,

reflection and reflective supervision, absolutely. Doing all of this in a collaborative fashion and

with partners in collaborating to make these programs possible.

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I see another one is indicating ((inaudible)) keeping parents engaged in the home visit throughout the length and service is certainly something that we have seen especially as a challenge for practitioners. Some other things that are being added here are really important.

Skills needed to support child development, I think we've hit on a lot of them, acceptance of paraprofessionals as home visitors; absolutely. And some of our training is certainly linked to establishing credibility for the field of home visitation.

And I just think we'll stop in this way I'll add just one more definitely. I'm seeing so many comments from people who have obviously spent a lot of time either in the field themselves or working with home visitors for establishing programs.

Weighing the time spent in professional development against the needs of a heavy, demanding caseload that is a challenge that is very common and one that requires balance. I - certainly it resonates with me about the retention of families and services.

Getting folks or families to open the door repeatedly, week after week means that if, you know, if something is really working in terms of being able to advance the intensity by keeping this as fresh and relevant to family needs that are often changing on the spot.

We'll continue to encourage your addition of comments to this and I see a comment up there on developing fidelity to models while implementing multiple home visiting programs. That's something that we are absolutely seeing in the state of Illinois and know that that is more of a challenge.

So thank you so much for contributing to this list. We're going to actually be sure that we're saving your notes so that we can come back to them again to be sure our conversation with you is directly in response to what you're seeing as challenges.

We're going to switch to talking about what the role of professional development really is in terms of addressing and being effective in addressing the challenges. Let's go to the role of professional development - very good. I need - there we go. Thank you.

Here are four items that we have really seen where professional development has much to contribute in terms of addressing challenges. The first is building the knowledge and skills of staff and supervisors. Having the knowledge and skill is about the most fundamental element of professional development.

We know that creating a continuous cycle of adult learning and reflection is critical to solid professional development. This is as opposed to a topical approach which I know Claire will be addressing and offering alternatives in terms of approaches to professional development trajectory.

The third one is including reflective supervision and coaching and in the comments that we've seen already from you as joining in on the webinar we know that's a challenge but it's one that we absolutely cannot afford to not have firmly in place.

So including reflective supervision and coaching is a critical element of professional development.

Contributing - or contribution to staff recruitment and retention is also an important element of professional development and certainly one that at the most basic level of saying hello to a The MIECHV TACC is funded under contract #HHSH250201100023C, US Department of Health and Human Services, Health Resources and Services Administration.

prospective staff member is vital in making a contribution to not only success in delivering

services but ensuring that the staff who are accepted into positions have the attributes that are

really needed for home visiting.

I want to just take a moment to hearken back on the chart that Kathleen showed us. I'm thinking

about the implementation science model and how the competency arm, the competency driver

like that really captures these elements of professional development.

With these in place let's take a few minutes to explore what professional development cannot do.

It's easy to want to - it's easy to want to make professional development addressing that it really

isn't fundamentally designed to do.

So hearkening back to this chart that Kathleen put up, it really is not a method that will address

deficiencies or challenges with the organizational drivers or, you know, lack of leadership. So we

need to be careful not to give training, professional development a bad name by trying to expect

that it is doing something that it really is not designed to do.

Some of those additional things that it is not designed to do is to replace formal education,

especially when it's required by the model.

So this is really something that we checked at the beginning of someone's employment at the

point of job interview that we're ensuring that staff coming onboard, have met the requirements

for formal education as it is required by the model.

Professional development does not resolve structural or capacity issues. This again addressing program, structure or organizational infrastructure issues is not necessarily something that professional development can do not necessarily change an organization's culture.

That would not be supportive of these nature of services. I know in Illinois we've often seen family support programs put in the context of a school. And there really needs to be attention given to how those two different disciplines within the context of an organizational structure will work together.

Certainly professional development cannot replace supervision and other organizational support.

So it's important to remember that professional development does have its limitations.

And that there are many things however, that it really can do to address the challenges that we're finding in delivering home visiting programs and in working with staff. So at this point I want to thank you again to your contributions to our polls in the chat.

I encourage you to keep them going as we continue to talk. And Claire, I'll turn it over to you at this point and - you can talk about some of the essential elements of professional development.

Claire Dunham: Thank you Janelle. We're having a little technical problem at our end here so if we get a little distracted or the slides start running crazy just hold on with us and we will catch up with you. We are at the slide we'd like to be at, at this point.

I would really like to thank everybody for the participation that you've offered so far in the webinar.

It's really important to think about how our professional development systems that we're creating

in a state, territories and tribal nations are really connected to the real life needs and challenges

of the program staff and the supervisors.

That's the reason why we began this discussion with what are the challenges that programs and

staff really face and are - those have been drawn from our experience providing professional

development and learning and growth experiences for home visiting programs in our state for

more than 25 years.

I also wanted to acknowledge Julie's introduction here when she made the comment that so

many of us started our careers or have at some point in our careers, done our work as home

visitors and that really resonated for me because in fact I did start my career as a home visitor.

And I have never lost my own loving connection to working with families in their homes. I think it's

one of the most exciting and most challenging ways of working and I am very excited to be a part

of this webinar today.

As we could see from the previous slides, professional development and training really plays a

key role in any infrastructure of support for our home visiting program. As this slide indicates the

MIECHV authorizing legislation gives us a specific mention of the importance of training and

supervision.

In fact we're lucky that the MIECHV program understands and in fact requires training and

supervision.

This slide shows us an actual quote from the authorizing legislation that says the MIECHV

program requires that each program employ well trained and competent staff as demonstrated by

education or training and provides ongoing training on the model being delivered and that the

program maintain a high quality supervision to establish home visiting or competencies.

So this is not often the case that a federal program description includes such specific language

around professional development and supervision. So we're very excited that that language is in

the MIECHV legislation.

And in this next section of the webinar we're going to get into exploring elements of an effective

professional development system and the steps for building that system.

I do want to share with you that there is a great introductory resource on implementation science

in the March 2012 issue of ZERO TO THREE's publication the title of which is supporting quality

through evidence based practices.

We'll provide you with a link to that publication at the end of this webinar. I'd like to begin my next

discussion - part of the discussion with talking about my core assumptions. So I'll ask you to

move the slide. Let's see if we can get it to go. There we are.

The point in this slide you will see are not rocket science but I offer them here just to simply make

our assumptions visible and help to bring everybody into a shared space for learning.

So essentially my core assumption begins here with the idea that achieving outcomes from an

evidence based home visiting model requires that you implement that model with fidelity.

In order to implement fidelity you've got to have professional development that nurtures and helps folks master the competencies needed and the competencies support model fidelity and are applicable across models.

So each of these assumptions is undergirding material that we are going to share with you in the next section of the webinar. Fidelity in this context is defined by the evidence-based home visiting model.

Some of the models have highly specific fidelity measures which can support programs in state systems as you design and build the professional development system. This is why the collaboration with the national model developers is so essential.

Professional development in our view has to be intentional, focused on outcomes and ongoing and continuous in order to support competency acquisition. So now I'd like to hear from you. And ask a poll question.

Again you'll see if you remember your feedback opportunity earlier, it's the same process. I'd like to ask you to consider or to share with us have your state developed or identified a set of competencies for your MIECHV program staff and supervisors.

I see some answers coming in already and I'll thank you. I'll give everybody a few minutes just to click on their answer. Again that's in the feedback box on the left hand corner or side of your screen.

Although some answers are continuing to come in it looks like the majority of the respondents are saying no at this point. I did want to indicate that if you are uncertain about whether your training

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teams are using competencies as a base please indicate no in this poll and we'll unpack it from

there.

Thank you for participating in the poll and giving us a chance to see that there is in fact some

work to be done on competencies which I think was supported by the webinar that was conducted

back in May. And we are going to be returning to the issue of competencies in the remainder of

this webinar.

While the poll results are continuing to come in I'd like to just focus together on the elements of

an effective system of professional development.

In this case I'd like to put forward that an effective system builds competencies through

continuous learning, reflective practice and a developmental approach.

And in this context competencies are defined as knowledge skills and attitudes that home visitors

and supervisors must acquire to be effective. We really believe that staff in the programs have to

learn the what and the how of their work but they also must learn the why of the model.

What is the research base? What is the philosophy and approach? We think that all the staff and

program leaders have to believe in the underlying philosophy of the model and have the specific

skills in order to act with fidelity.

We also think that staff need content knowledge and process skills such as knowledge about

child development, maternal health, infant care, home safety, just to name a few.

Frankly we expect our home visitors to know so much that it's often overwhelming to imagine how any one person could be such an expert before they are well into their old age. We also think that home visitors need process skills such as developing and using relationships as a vehicle for learning.

So those are all the elements within the idea of competencies. We also - we think that a system for professional development should be employing a continuous learning approach.

And by that I really mean going way beyond a basic or core training and creating learning experiences that are available over time that are integrating training with past and current experiences both work and personal.

And creating a continuum from beginner to advanced and remembering that we want to inspire learning at all stages of the home visitor and supervisors' job life. Progressive mastery is what we're after. We don't want to repeat the same experiences.

I had a colleague tell me years ago do you have a home visitor who has ten years of experience or do you have a home visitor who has one year of experience that's been repeated ten times?

This has really been an important guide for me in my thinking about how good professional development processes need to be created. We also think continuous learning needs to include peer learning.

As the slide indicates, an effective system for professional development also must use reflective practice. And for us this means a variety of things but suffice it to say that we'd like to try and active the parallel process at every opportunity.

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This is where we want to embrace the home visitor and really create opportunities for trusting credible relationships that they can repeat with the parents and children that they're working with in hopes that the parents will be able to repeat that experience with their children and with family members themselves. How you are is as important as what you do.

The last element that I've noted here on the effective system is taking a developmental approach.

And within that I'd like to just share that we think that learning experiences need to be structured to support the development of knowledge and skills and having a coaching and progressive learning that becomes more advanced, can really help retain staff in their jobs over time so that we don't lose staff just at the point that they had really gained mastery.

We also think that people and programs are best developed using a developmental approach and that the learning experiences that we're creating for home visitors and supervisors have to connect and make sense with their work experience.

We have to continually connect back to see what's really happening in their job and make sure that the training and professional development close the gap between the rhetoric that they hear every day and their reality of actually working with family.

I'd like to move now to talking about getting a system started up. Everyone involved in the MIECHV program across the country is starting up a system of professional development right now. This slide identifies what we think are the most common strategies in use at this stage.

People are requiring and funding individual programs to obtain the training for their selected model. Some people are contracting directly with national model developers to provide training for all of the programs in their state.

And some folks are funding or collaborating with other training entities in their state or their region to train MIECHV programs' staff and supervisors. I think these are all really great startup strategies and they're particularly good in a couple of ways.

One is that they're getting new staff and programs through that initial startup. They're making sure that programs are making connections to the evidence-based models and the resources that come from those national model developers.

And using these strategies help make sure that MIECHV programs are making connections with other programs and training entities in their own area. This is all a great way to get started. But the challenge is to move from this starting point to a fully realized system of professional development.

And for this webinar we've proposed what that system might look like. So I'll start here with thinking about the end state that we have in mind and for us a fully realized system of professional development for home visiting programs like a MIECHV would be a sequence track of learning experiences that are designed to support home visiting and supervisory staff in the acquisition and mastery of competencies.

This in many ways is summarizing up what we've been talking about for the last few moments.

We also think that in this sequence track the home visitors and supervisors would be supported

as they progress from being newly hired to being intermediate and to more advanced stages of mastery.

And that their learning experiences would be part of a system of formal training in person and online that included coaching and supervision and communities of practice that activate peer learning. So now I want to move on and look at elements of building a system and we'll revisit this end state.

For the next three slides I really want to explore with you some of the steps toward building an effective system. There is a sequence implied in this slide and that's there for a reason.

It really begins with knowledge trainings and builds toward more complex elements of skill development and community of practice over time. Many of the elements on this slide can be initiated at the same time with enough resources and that should accelerate the progression.

The sequence can and should be considered and adapted as you see fit since each state and territory and tribal group comes to the MIECHV project with their own set of experiences and resources. And that can create some substantial variation across the country.

I think if you take a look at the elements here on the slide you'll see things that look very familiar. We think it's important obviously to have the basic or core training on the model.

We also see the necessity of having follow-up training and TA on model fidelity as well as training on the MIECHV benchmarks which are very complex as Kathleen mentioned in her beginning comments.

The home visitors are being asked to track a lot of elements of change and progression with families and keep up on those benchmarks.

And so it's very important for the program staff in MIECHV sites to understand why those benchmarks are in place and how they relate to the work that they're doing every day with families.

We also think an effective system should include topic based trainings on critical issues that impact effectiveness. Remember in our earlier slide we talked about some of the challenges.

And we noticed that there were challenges that were very specific to what families present in home visits such as substance abuse and domestic violence. And we found that trainings on these topics really help home visitors and supervisors feel supported by their leaders and their training providers.

They need information and answers pretty much right now when these issues occur. And they are often really eager to participate in trainings on these topics. The last element that we see on this slide of an effective system again returns to the idea of defining a set of competencies.

We've mentioned that a number of times in this slide and we are going to return to that one more time. But I'd like to add three more elements of building a progressive system and an effective system of home visiting.

I'd like to ask Lena if she would move us to the next slide because I've lost all control of my slide progression. There it is. These last elements are what I think are a little bit more complex and sophisticated approaches.

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The first really refers to creating learning experiences that are focused on skill development.

These are very important and are more - require a more focused cadre of trainers and TA providers in order to make sure that this kind of learning experience is actually connecting the dots between what's being learned in training and what the home visitor or the supervisor is actually using in the field.

This is an opportunity for home visitors and supervisors to interact with each other in the skill development experiences. And that helps us also look at how peer learning networks can support both the acquisition of knowledge and the acquisition of skills in being effective as a home visitor.

One of the things that I've learned over time is how much human beings love to find things and discover new skills and knowledge on their own. And so I've had experiences where I've identified a great supplemental curricula that I wanted to add to the home visiting program.

And I tried all kinds of tactics and strategies and trainings to try to get the staff to buy into that and couldn't make a lot of headway. And then after a while the program supervisor goes to a conference and she finds the very same materials in the resource room, comes back excited and raring to go.

And through that process I'm reminded - I was reminded again how much people really want to discover and create and construct knowledge on their own. And using that knowledge helps us create peer learning networks and communities of practice that do just that.

They really - by creating opportunities where staff and supervisors can interact with each other, share experiences and get excited in ways that doesn't necessarily happen when it's coming from the top down.

I'd like to take a second here and just return to the desired end state. You'll remember this slide from earlier or I'll ask someone to move to the next slide. Thank you. There it is. This desired end state is a real system.

It's one that develops human potential and the specific competencies needed to be a successful home visitor and supervisor in an evidence-based MIECHV model.

So now we'd like to hear from you and on the next slide you'll see a poll question because many of you said that you are not yet using or have identified or developed competencies for your MIECHV programs.

But we'd like to ask folks if you have examples of competencies that you'd like to share with the MIECHV community. Although you may not be using them yet yourself you may be sitting on some examples. I can see the answers coming in.

So we have more people saying no, they don't have examples than we have people saying yes. But we only need a few.

So I'd like to just progress to one of my last slides here and really think for a second as we consider the challenges of developing a system of professional development for MIECHV programs. The good news is that there are many, many resources to draw from.

And one of the things I like to think about is that your vision for a system of professional development can be the thread that links together all of the resources we see on this slide as well as the resources and support in your particular state and can really help you move ahead.

I'd like to see if there are any questions or areas where people would like to expand on the information that's been provided already. So this is a time where you could enter any questions or comments that you have in the chat section.

Janelle Weldin-Frisch: Claire I see that we have a couple of comments about some of the challenges related to supervision without being able to directly observe what home visitors are doing. I just want to say that it is hard to evaluate and hard to do coaching and mentoring in the absence of direct observation.

However, we have found that there are some tools that can be used to assist in that way. One of them includes training and the introduction of home visitors to the idea of using videotapes in the course of their work with families.

And we have begun also doing training with supervisors especially once home visitors are comfortable with the use of a video in the context of a home to also use that in application with supervision.

And the parallels are just really strong in terms of a need for a strong trusting relationship between home visitor and supervisor for that kind of - for that tool to be used effectively in home visiting - not just in home visiting but in the supervisory session.

But it is effective in taking a look of the transfer of what has been learned in the course of training

to see whether or not it is actually making a difference in the way that services are delivered in a

home.

Claire Dunham: I would add onto that I noticed that Miriam Westheimer, when you made your comments

about trying to support quality when you don't have direct observation you mentioned not only of

the staff but of the supervisors as well and that can be a big challenge.

We have implemented a - we have implemented a process in our state of having supervisors

videotape themselves conducting supervision and sharing those tapes with each other in

reflective practice groups where they can help each other focus in a facilitated session on what

are the skills and approaches that are really effective in supervision.

It can be very challenging work and that is - that did take us many years. I want to...

Janelle Weldin-Frisch: Yeah.

Claire Dunham:...acknowledge that. But we really want to be able to support you in that. Carol - hi Carol

McNally it's nice to see a familiar name. I note that you're asking if we can share which states

answered that they had developed and implemented core competencies.

The limits of the technology in this particular webinar don't give us a read out of who answered

where so we will be doing a - some kind of follow up survey to collect that data in more specificity.

I share your interest in knowing specifically who's got core competencies to share.

And we've got a way in our follow up to really - we want to try to provide a place on phConnect where we'd be able to upload examples and share with each other and HRSA's and the MIECHV TACC is going to be helping us to do that.

I do see the comment from you Lorraine that the Early Head Start Home-Based programs learned a lot about supporting home visitors from ZERO TO THREE in the '90s. So we're really helping you're going to build on that. And you're absolutely right, there's no need to reinvent the wheel.

The Early Head Start home visiting model is one of the approved models for MIECHV and is active in many of the states. It's really wonderful to hear folks thinking about the - thinking about that process.

I do want to just note that we did see a couple of folks making comments earlier about the challenge of retaining families in the program and dealing with families that no-show for their home visiting appointments.

And I do want to acknowledge that we see the interconnection of this - the challenge of establishing trust and credibility of developing the goal directed relationship with families as being really the mechanism by which states are trying or which programs are trying to have an impact on retention.

I think all of the program models have some analysis of what causes families to drop out. And I'm sure we could have a long and very robust chat about that in this webinar.

Suffice it to say that there are some really important elements of both training and supervision that are really helpful in trying to manage that issue. I know that staff become very anxious when they're being held accountable for something that they feel like they have no control over.

I do see Miriam's comment also coming in about - wondering whether states are building career ladders for home visitors.

And I do think that that's something that might be returning to in a subsequent webinar, we haven't fully explored where we might be going with the next steps around professional development discussions in MIECHV and we'll be coming back to that at the very end of this webinar today.

I see your question Billy - how are MIECHV programs coordinating with this state early childhood professional development systems and I think your comment and Miriam's are connected - how are we doing it in Illinois?

We're connecting to our state's system by becoming an authorized training entity for which our home visitors can receive points towards early childhood credentials in our state.

And many states are linking these career ladders and special development systems to their early learning challenge grants within Race To the Top. So there are maybe further efforts coming with federal support for that.

Julia, I see a wonderful comment noting that the HRSA regional project officers can connect grantees with other states and we do really want to encourage everyone on the webinar to use your regional project officer as your primary resource for making connections with other grantees.

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I think we'll move on at this point and I just want to thank everyone for your participation in this section of the webinar. We have a few more elements we'd like to touch on with you.

Kathleen Strader will be coming back on the line to share some possible next steps that we might take together in developing and supporting a system of professional development for home visitors and supervisors in every state and creating a system of embrace for state leaders as you are going through this process. So Kathleen we'll move onto you.

Kathleen Strader: All right. Thank you Claire and thank you Janelle for informing us in such a clear and compelling way about what it takes to build an effective professional development system.

And I think most especially to everyone who joined us on this webinar today for the feedback you provided and the comments and the questions that really brought this webinar to life.

I'd like to take just a few minutes because I see the clock winding down and I know we're getting to the very end, to share some ideas about how you, meaning MIECHV grantees, can get ongoing support as you either begin to put in place your state's professional development system or further develop the professional development system that you already have in place or that you've started.

I want to reference back to something that Claire had mentioned as she was talking. She spoke about collaboration with model developers and how essential that is.

I want to underscore that and to encourage you regularly to be seeking TA from the models that you are implementing. Many of the models are on the call today which is wonderful.

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And we are working to increase the coordination around the technical assistance and support available to all grantees so that the very complex need around building a system that is really larger than any one model when thinking about the cross model professional development systems' multidisciplinary training for staff.

And so I want to share with you a little bit about the work of some of the federally contracted TA providers meaning the TACC and - for state grantees and the Tribal Home Vista for tribal grantees because I know we also have some tribal grantees on the line.

The - each state grantee has the ability to request and receive TA support from the TACC. And tribal grantees receive TA through the Tribal Home Vista.

And just so that we're all on the same page when we talk about or think about technical assistance I think it's really important that we consider it as really a strengths-based approach that is available for all grantees regardless of where you are now that it's available to assist you in advancing to the next level.

Sometimes TA can be viewed from a lens that is maybe, you know, from a standpoint where, you know, a problem needs to have occurred in order to be able to seek out TA.

And I just want to reassure everyone that in fact it really is coming from a perspective of how do we all work together to grow and enhance our system so that we are doing our best work on behalf of families and children?

And so you can access TA by calling or emailing your regional project officer or through a TA request form that very soon will be available on the TACC Web site.

Some of the challenges that have been chatted throughout this webinar are excellent examples of things that the TACC can provide support on.

Another option is through peer information exchange and I think one of the most fundamental things that we as TA providers can do is to help increase your exposure to and to deepen your understanding of what is going on in other states both within the region that you're in as well as across regions.

And this may involve, excuse me, helping to establish a connection for you with another state who has implemented a strategy that you are considering and can provide guidance and information on what worked and maybe what didn't work so well.

This can also take place - this type of, you know, information exchange can take place on monthly regional conference calls and so you may have folks from your region who are interested in talking more specifically with each other about this particular topic of professional development system building.

And in doing so in that capacity on a regional level would allow you to delve deeper than what can happen on a universal webinar. The TACC can also help to facilitate those - your state to state connections or follow up regional calls.

And then another great way to exchange information is through the online portal phConnect. And we know that state grantees have been wanting an online mechanism for sharing with your colleagues from other states and we're so glad that it is here now.

All state leads should have received an invitation to the MIECHV grantee room on phConnect.

Tribal grantees have access to a similar online portal for sharing which Tribal Home Vista has said should be up and running by the end of October.

So for the state leads on the call if you've not already done so, all you have to do is accept the invitation that came from Tracey Harding of the TACC and you'll be on your way. But as with any online portal of this type if you've participated with them before it is only as rich and robust as you make it.

It's your venue for communicating with your peers and asking questions and sharing documents and files with one another. I think about the dialog we've had today around sharing competencies and being able to do something like that on phConnect is certainly a good use of that resource.

And then finally the TACC will be establishing a learning community or community of practice around professional development systems issues.

And we're really, really excited about this and the opportunity it allows for interaction with national experts and other cross regional colleagues to discuss in smaller group format the issues and interests that are most pressing to you in regard to strengthening your state's professional development system.

You know, there have been a number of topics that have been chatted today in the webinar, things, you know, around developing career lattices, working in collaboration with others in the state in a partnership around professional development.

All of these would be great problem solving and systems strategizing discussions for a community of practice on professional development.

So if we think about this for just kind of the last minute here to let you know as it relates to a community of practice the TACC will be hosting a Web conference on November 7th at 3:00 pm Eastern time for state grantees and any professional development partners in the state that are interested in learning more or possibly becoming part of a community of practice.

You'll receive more details about this kickoff event soon and the way that communities - the community of practice rolls out will be based on, you know, one, the volume of interest and the topics that you most desire.

The community of practice will be designed to promote both within region and cross region relationships, excuse me, that lead to ongoing dialogue and information exchange about the issues that matter most to you.

So it's really intended to help advance state and local capacity in a way that promotes home visitor competence and fidelity and also as a way to elevate research informed professional development strategies that can strengthen the infrastructure of your home visiting system.

So there are a number of potential topics and we'll be prioritizing based on the needs and ideas that we hear from you. So it'd be, you know, a great time as Claire had, you know, indicated in The MIECHV TACC is funded under contract #HHSH250201100023C, US Department of Health and Human Services, Health Resources and Services Administration.

the chat to please share any ideas that you have for topics in the chat while we're all still on the line together.

All ideas are valid and good ones. You know, there's no worries. If you feel like you don't know enough yet or aren't far enough along yet in your thinking or planning that's perfectly okay.

You know, let us know where you're at because then we can make sure we include, you know, maybe it is around some just ground floor strategizing about professional development system planning.

And so knowing what's important to you will help us orchestrate different communities to meet different needs. And we really hope that you will play a part.

I think the ability to advance our thinking on this topic can make all the difference in how well we are able to address the competency drivers of the implementation science triangle which we know to be an absolute necessity to overall program success.

On this next slide you have my contact information. So if you think of any ideas after this presentation that you didn't have a chance to chat while we were together please feel free. We'd love to be in receipt of those as we, you know, put forward the plan gearing up for the November 7th Web conference.

And I very much look forward to the continued conversation. Susan, I'm going to turn it back over to you.

Susan Stewart: Great. Thank you so much Kathleen and thank you so much Claire and Janelle from the Ounce of Prevention for providing your fabulous experience and knowledge to share with us and all of you participants for sharing your experiences as well.

It was great to hear about not only your challenges but some of the things that you are doing in regard to addressing this issue.

So I encourage you to look back at the beginning of your PowerPoint handout and I want you to scan the list of the learning objectives and take a moment to reflect on how each of those objectives was addressed in this webinar. You might want to jot a note or two down by each of those learning objectives.

And in the next day or so, probably tomorrow, you'll be receiving an email with a survey monkey from Ms. Africa Queen at WRMA and WRMA as you'll remember, is one of the TACC partners.

And this email will include a link to a feedback form that's going to ask about these learning objectives.

Attached to that email or actually it would probably be a separate email, will be a PDF copy of the PowerPoint handouts and also the article that was mentioned and requested a couple of times. Eventually this webinar will be archived and you'll be able to find that on the MIECHV TACC Web site.

It - we have to do some work to prepare it so that individuals who have disabilities and use different types of equipment to view the webinar can do so and until that is completed they won't be up on the Web site. So just we have to wait that to occur first.

So we want to thank you once again for participating and we hope you'll be able to join us next month on October 24th when our webinar will focus on impacting infant mortality through home visiting. Thanks everyone and have a marvelous day. Bye-bye.

Operator: Ladies and gentlemen that does conclude today's presentation. We do thank everyone for your participation.