

**Maternal and Infant Early Childhood Home Visiting (MIECHV):
Training and Technical Assistance for the Early Head Start Home-Based Model**

Operator: Good day and welcome to the ZERO TO THREE MIECHV 1 conference call. Today's conference is being recorded. At this time, I would like to turn the conference over to Kelly Claire. Please go ahead, sir.

Kelly Clare: Hello, everyone. My name is Kelly Clare and I'm with iLink, and I will be giving you a few housekeeping things before we start today's session. We'll be taking questions via our private chat. So if you focus down towards the lower left you will see a tab marked "Private." If you are having any technical challenges, please find my name, Kelly Clare, and send those chats directly to me and I will be more than happy to help out.

If you have questions during the session that you would like to address the speakers, please choose the "Leaders and Assistants" and we will try to get to those questions at the end of the session. Any ones that we – that are not answered, we will address after the session via email. So please put those questions and address those to Leaders and Assistants.

We will not be using the "hand raise." So there's a hand raise button at the top of the session window; we will not be using that today. Please use either the chats to myself for questions or Leaders and Assistants for questions regarding today's session. With that, I would like to turn the session over to your moderator, Mary Block. Mary, go ahead.

Mary Block: Hello. I'm Mary Block, senior writer, trainer, and home visiting lead with the Early Head Start National Resource Center. Welcome to the Maternal and Infant Early Childhood Home Visiting, or MIECHV, Training and Technical Assistance for the Early Head Start Home-Based Model webinar.

We're fortunate to have with us today three prominent guests from the Office of Head Start Early Head Start home-based model. Yvette Sanchez Fuentes, the director of the Office of Head Start, will give us an overview of the EHS home-based option for MIECHV. Damón Manning, Training and Technical Assistance Program Specialist, Office of Head Start, will provide us with an in-depth look at the redesigned OHS training and technical assistance system. David Jones, Home Visiting Specialist, Office of Head Start, will provide us with specific information on T/TA provided to date and what you can look forward to in the future.

We will have time for questions and answers at the end, so please send in your questions as Kelly suggested. If we cannot answer them today, we'll be sure to include them in a future correspondence. We'll be archiving today's presentation so you'll be able to get it on our website at some point in the future.

So without further delay, it's my pleasure to introduce Yvette Sanchez Fuentes.

Yvette Sanchez Fuentes: Thanks, Mary. Thank you so much. Hi, everyone. As you know, I am Yvette Sanchez Fuentes and I'm currently the director for the Office of Head Start. And it really is a pleasure to be on with all of you today. But most of all, I want to thank you all for taking the time and participating in today's webinar. This is a very exciting time for Head Start and for the nation's broader early childhood community.

As many of you may know, the 2010 Patient Protection and Affordable Care Act allocated significant funds to states to expand evidence-based home visiting programs in at risk communities through the establishment of the Maternal, Infant, and Early Childhood Home Visiting Program. This program is intended to assure the effective coordination and delivery of critical health, development, early learning, child abuse and neglect prevention, and family support services to children and families who live in at risk communities.

During today's webinar you will learn about our training and technical assistance infrastructure and the systematic approach used to provide support for more than 46,000 children enrolled in our Early Head Start home-based programs across the country. Our team will discuss materials and support available to MIECHV grantees and funded programs and how to access these resources.

Finally, the roles and responsibilities of the Office of Head Start Regional and Central Offices as it relates to providing support for model fidelity and the Head Start Program Performance Standards. I just would like to share a quick overview of the Early Head Start home-based option for the MIECHV program.

So first of all, the Early Head Start home-based option was selected as one of nine evidence-based home visiting models for MIECHV. The Early Head Start home visiting model provides high quality, culturally competent child development and parent support services. Through the Head Start Program Performance Standards, we provide guidelines and requirements for the delivery of Early Head Start services. And the Early Head Start home-based option is designed for families where the home is the child's primary learning environment. In addition, for pregnant women and/or expectant parents, home visits are conducted to ensure access to comprehensive prenatal and postpartum care.

Some key features of the Early Head Start home-based option include an emphasis on the parent's role as the child's first and most important relationship, an individualized family partnership agreement that determines the parents' or expectant parents' goals and experiences that comprise their child's curriculum. And while Early Head Start does not require a specific curriculum, Early Head Start program staff use a variety of curricula such as Parents as Teachers, Partners for a Healthy Baby, and Creative Curriculum during home visits. And finally, families enrolled in Early Head Start identify goals that best support their healthy development and self-sufficiency as part of the family partnership agreement.

Under the MIECHV program, every state and jurisdiction, as well as tribal communities, had the opportunity to apply for home visiting funds, identifying which evidence-based model or models they would implement. Fifteen states selected the Early Head Start home-based model, and we know that the success of its implementation requires collaboration at the federal, regional, state, and local levels.

For this reason, the Office of Head Start has been in regular communication with our federal partners around home visiting. For example, we participate in HRSA's model developer forum with the other model developers, sharing information about the Early Head Start home-based model and how we're working with states to meet the MIECHV benchmarks, as well as hearing from HRSA about the state's technical assistance needs.

We have also encouraged and supported collaboration between Office of Head Start regional staff and states to ensure the effective coordination and delivery of Early Head Start home-based services to children and families. In addition, we continue to work closely with MIECHV state home visiting leads, informing them about what the Early Head Start home-based model is, helping them to understand the

Office of Head Start's infrastructure for providing technical assistance, and answering questions about the tools that Early Head Start programs use to assess child development in partnership with parents.

The Office of Head Start has also played an important role in helping to facilitate communication between the states and local Early Head Start programs who are MIECHV grantees, identifying areas where these programs may require additional training. For example, some states require a particular maternal depression screening tool to be used to meet MIECHV benchmarks, and Early Head Start programs who are MIECHV grantees may need training to use this tool. Or an Early Head Start program may already be using a certain child development assessment tool but the state may require them to use it in a different timeframe in order to meet state – state benchmarks. And we try to help coordinate this with the local program.

We also oversee the monitoring of the Early Head Start home-based model to ensure that it is implemented with fidelity. This includes conducting reviews of Early Head Start grantees who are participating in the MIECHV program according to their regular monitoring schedule and working with the division of quality assurance and control to ensure that reviewers who are conducting site visits understand some of the different elements that may be required for those grantees to meet MIECHV state benchmarks.

Some of our Early Head Start programs are beginning to recruit, hire, and train staff, and are also beginning to enroll families, delivering some of the same high quality services families enrolled in our federally funded Early Head Start home-based option currently receive. In August 2012, we conducted our first implementation support site visit to gain additional insight into some of the success and challenges of implementation to better inform our approaches to providing training and technical assistance to states and programs.

These are just some of the many ways that the Office of Head Start is supporting the MIECHV program to ensure that pregnant women, children, and families who are served through the Early Head Start home-based model receive the very highest level of care and support to ultimately improve their health and developmental outcomes. So once again, thank you all for taking the time to join the webinar, and I hope that you enjoy the webinar and get a lot of good information. Thank you.

Mary: Thank you, Yvette. Now I'd like to introduce Damón Manning, who is the training and technical assistance program specialist for the Office of Head Start. And he will provide us with a look at the redesigned OHS training and technical assistance system. Thank you, Damón.

Damón Manning: Thank you, Mary. And welcome, everyone. I'm really excited to have the opportunity just to tell you a little bit more about the training and technical assistance system. And during my time together with you, there are a couple of things we would like to make sure we accomplish.

First, I'd like to just provide you with an overview of the redesigned OHS T/TA system, also to provide clarification on the roles and responsibilities of what we call our early childhood education specialists and our grantee specialists. And these are the individuals within, which you'll learn about, our state-based system who work directly with you as grantees in helping you to support your program's goals and also to provide information on how to access the T/TA system.

So as we all know, that – in 2007, Head Start was reauthorized, and under the title of Improving Head Start for School Readiness under the School Readiness Act for 2007. And here in the Act we really look at

how programs really support school readiness for young children and their families. Also in looking at how we address quality and making sure that programs are – are supported in – in getting out of deficiencies and also preventing them from exhibiting any deficiencies in how they deliver services. And finally, also how we continue to support the individualization of all programs and how they support their individual goals that are very unique to their own programs and their communities.

So for many of you, as we know, that are on the call – the programs here that are involved in MIECHV initiative, we know that you are existing Head Start and Early Head Start programs. So, many of you are probably aware of the TA system. So what we'd like to do – actually, Kelly, this would be a good time for us to open up the poll. And we'd like to hear from you. We have a question for you that we'd like to get some feedback from. And that is, for those of you – have you had a visit from what we call our early childhood education specialists, or specifically for Early Head Start programs, our infant/toddler specialists? So on your screen, what we need for you to do is click and answer yes, no, or not sure. So let's take a quick moment to respond.

So it looks like, of our participants, 26 percent of you – well, 4 percent of you have or are aware of a visit from your early childhood education specialist. Some of you are not sure if you've had the support from a TA system. And then, 26 percent of you that are on the call have not received or believe not to receive support from an early childhood education specialist. What we hope from the – our discussion here is you'll find out more information in terms of the TA system and also how to access that. And we'd like to talk – use this time to talk more about the TA system because this is a service and support to you as a program. We want to make sure that we provide that service to you and that you're very comfortable and well aware of how to actually access that – those services. So we can close the poll now, Kelly, and we move forward. Thank you.

So with our Office of Head Start training and technical assistance system, as we know – as we mentioned in terms of the Reauthorization Act, really mirrors what we call those key areas that I mentioned earlier. Really looking at school readiness, also supporting programs in – in their systems, as well as making sure that we continue to support and encourage programs meeting their individual goals that are very unique to their own communities and the children and families that they serve.

So our – our vision is really to make sure we provide a coordinated system that works together seamlessly to ensure that Head Start and Early Head Start programs have access to quality information, resources, and materials. Our mission is to support all Head Start and Early Head Start programs to bring best practices into agency systems and services to promote continuous program improvement. And finally, our philosophy is really that every Head Start and Early Head Start program deserves access to the same level of high quality T/TA to produce the best possible outcomes for children and families. And T/TA is making sure that it is timely, that it's relevant, that it reflects best practices, data driven, as well as systematic. Our system in terms of how we deliver services has what we call our guiding principles.

Here – making sure that our TA services are easily and logically accessible and usable; that they really promote capacity building and use sustainable practices; that they're culturally and linguistically responsive; that they're really rooted in evidence-based materials in their approach. They incorporate best practices; that they're timely and relevant, respectful, and professional; that we really mirror the comprehensive approach that Head Start takes to delivering services to young children; and then also making sure that we promote school readiness.

How do we do this? Looking at that, our TA system itself has three components. They are the National Centers, our state and regional T/TA centers, and direct T/TA funding. And I'd like to take this moment to really highlight here with direct T/TA funding. These are the dollars that are appropriated to Head Start programs to support training and technical assistance goals in their programs. Here you'll notice that we're all part of the same system. And so, really highlighting the role that you as programs play as a part of the TA system versus being just the recipients, if you will, of T/TA. And we'll talk a little bit more about that shortly. So first, let's take a look at the National Centers.

Our National Centers function as a team to provide Head Start grantees with consistent information from OHS across all service areas. Each Center has an area of focus and is staffed by experts who have extensive experience with Head Start and with the development of effective interventions that make a difference in the lives of young children and their families. Tasks that are common to all Centers including communicating best practices to the field; providing content rich, usable, and practical resources and information to T/TA specialists, grantees, and other early educators; provide training and re-training at regional and national meetings and institutes; and also providing ongoing guidance and support to T/TA center staff.

Our National Centers include: the Early Head Start National Resource Center, which is led by ZERO TO THREE; our National Center on Quality Teaching and Learning, which is led by the University of Washington Harding Center in collaboration with the University of Virginia, Vanderbilt University, Iowa State University, University of South Florida, University of Wisconsin Milwaukee, and the University of Illinois at Urbana-Champaign; the National Center on Parent, Family, and Community Engagement, which is led by the Brazelton Touchpoints Center at the Children's Hospital of Boston and the Harvard Graduate School of Education Family Research Project, with the following partners including Save the Children, the National PTA, and the Council of Chief State School Officers.

We also have the National Center on Cultural and Linguistic Responsiveness, led by Bank Street College of Education in partnership with the Educational Development Center, and in collaboration with Colorado Colorado. Also, the National Center on Program Management and Fiscal Operations, which is led by the Academy for Education Development in partnership with the Training and Technical Assistance Services Department of the College of Education and Behavioral Sciences at Western Kentucky, and the University of Massachusetts Donahue Institute. Finally, we also have the National Center on Health led by the American Academy of Pediatrics.

Next we have our state regional T/TA centers, and these are comprised of a cadre of T/TA specialists who work directly with grantees, and this includes our early childhood education specialists and our grantee specialists. Our early childhood education specialists are bound by – they have four key goals – key areas in their scope of work which they connect with you as programs to support. Mainly that is to provide training and technical assistance on school readiness; to provide training and technical assistance; and supporting career development; to really support collaborations with other early educators and your state; and then also provide training and technical assistance related to parent, family, and community engagement.

Our ECE specialists actually have specific training and credentials in early childhood. Here they work – they have backgrounds in birth to 5, birth – birth to 3, as well as preschool-aged children as well. We have what are called infant/toddler specialists who are the leads, and they have specific training, credentials, and backgrounds in Early Head Start as well as with infant/toddler development. And these

are primarily individuals that work – will be working with your programs or are already working with your programs as related to the goals and supporting quality within your programs directly.

Next we have what are called grantee specialists. And these specialists are actually deployed by the Regional Offices, and they're based... Their work is based upon areas of concern or risk, and this includes monitoring findings, PIR, risk management or audit findings, and other needs based upon data reviewed by their – your respective Regional Offices. So these individuals are deployed based upon those, whereas your early childhood education specialists or infant/toddler specialists, they work more fluidly with your programs. Our ECE specialists and infant/toddler specialists are actually assigned to programs as the point of contact. So they themselves – you have ongoing contact with them. And if – in the event that you want to connect with them, you can either contact your Regional Office program specialist and he or she will be able to direct you – directly connect you with the ECE specialist in your respective state or you can actually, if you're already aware of what we call state managers, he or she would also be able to connect you to your ECE specialist.

Finally, we'd like to really highlight direct T/TA funding. Our grantees – as you know, 50 percent of all funding that's appropriated to Head Start in T/TA goes directly to grantees. And here we really encourage grantees to use their T/TA dollars strategically. Really to maximize the use of free and/or low cost services and resources available through T/TA specialists and special initiatives and partnerships, but also to use T/TA dollars to secure high quality individualized services and resources that are not available through the T/TA system.

So one of the things you really want to highlight here is that you as – as programs you use these dollars in concert with the other resources, the National Centers as well as your state T/TA specialists that come out and work with your programs to really comprehensively support all of the goals and concerns as well as needs in your programs.

So how does it all work together? As we know with our Head Start model, Early Head Start home-based model that bears a comprehensive approach to how we support young children and their families. And what we see here are some of the key areas with our programs that we're responsible for. Looking at program governance, management systems, looking at fiscal integrity, looking at our child health and safety, family community engagement, as well as child development and education. And those of you who are in Head Start are very familiar with our eligibility, recruitment, selection, enrollment, and attendance requirement as well, or what we refer to as ERSEA.

We look in terms of how we provide support to your programs in three overall arching areas. Looking at direct individualized support to grantees, the resources and materials, as well as training. So we take a look at direct individualized support. You'll see here with our ECE specialists, they work directly and provide direct individualized support to grantees in the areas of child health and safety as it relates to the environment particularly. Also looking at family and community engagement, and they provide direct services to your programs in the area of child development and education.

Grantee specialists, as we mentioned before, primarily who are deployed to your programs, provide support to your programs as it looks – as it looks at systems in the areas of program governance, management systems, fiscal integrity, ERSEA, child health and safety, as well as family and community engagement, particularly as we talk about partnership agreements and also bringing how we recruit families into our programs.

And then finally, as you see here, if you look at the green box itself, you as programs are able to use your direct T/TA funding to really support and look at all of these different areas to really strengthen them using your own T/TA dollars.

So, next we have materials and resources. And here, once again, we really highlight the role that our National Centers play in providing materials and resources in all of these areas. As you see here, with all of our National Centers, the six that are listed here and looking at the red boxes, here we like to show that we have support services for all of our grantees in all these areas.

Next, we have the area of training. With training, we have our Office of Head Start National Centers. And they provide support in training, as we mentioned before, at regional as well as national trainings, and with special initiatives that are specific to our particular regions in these different areas as well. Also, our early childhood education specialists, once again, provide direct training to your programs, or can provide direct training to your programs, not only at training events or cluster events but directly to your programs in the areas of child health and safety, family and community partnerships, as well as child development and education.

Our grantee specialists, as you see here, also are able to provide training in the respective areas we talked about before, including program governance, management systems, fiscal integrity, ERSEA, child health and safety, as well as in family and community engagement and systems that are associated with those areas.

And then finally, once again, you as a program are able to provide training to your own programs that's individualized in all of the areas that are listed here. So we have all three areas – our National Centers, our state T/TA centers, and direct T/TA funding – working together to provide quality training and technical assistance support to grantees. So, how do we look at these three components in action? What I'd like to do really quickly is just to provide just a couple of examples of how we can bring all of – how all of these components work together.

So first, we have our program that – if I think about a scenario where the Early Head Start National Resource Center, they provide to you a variety of different resources. In this case, let's talk about some of the tip sheets that they provide. And as a program, you come together and you look at some of the tip sheets. Let's think of, maybe, some that reflect how socialization should occur in your respective programs. And as a result of looking at those tip sheets, you decide that you and your program would like to take a deeper look in terms of how adult interactions are occurring in – in the socialization experiences, as well as also how those experiences match up or really – or really support the different – the five essential domains in the Head Start Child Development and Early Learning Framework.

So next, you contact your infant/toddler specialist from the T/TA system and then they come in and they work with you and your managers to really look at those systems. And as a result of your discussion and working with your infant/toddler specialist, you decide that there's some further support that you can need in terms of how you really foster looking at math and science development for infants and toddlers. And this would fall under the cognition and general knowledge portion of the five essential domains.

So as a – before the discussion, you decide that you would like to use your T/TA dollars to send staff to a certain training or a conference that's coming up where you can look into other approaches or curricula out there that really support math and science development for young children. You also then have a

conversation with your program specialist to look at your own T/TA dollars through your T/TA budgets and decide that you could use those dollars to send someone to the training. But also, as the staff member finds the specific curricula or approach that they would like to integrate into your program, you decide that you would like to have further support by a mentor/coach by bringing them onto your staff to work with your staff on a longer term basis to be able to coach them through to effectively implement the new practices that you feel further strengthen math and science development for infants and toddlers.

So as you hear, we have, once again, the resources that come from – from the Early Head Start National Resource Center, which is our National Center. You use your infant/toddler specialist to help you look at how to assess how well you're doing that in your program. And then you use your direct T/TA dollars to really implement that as it relates to specializing for your specific program.

Now, let's take another example as well. So here we can – have another example where we may have the National Center on Health. You may use the resources from them that provide guidance and materials related to the connection between health and school readiness goals. Once again, you have your infant/toddler specialist or early childhood education specialist to use this document with your program to promote a discussion with you and your managers. And this discussion – through the discussion, issues related to oral health are further explored, prompting a look at data and possible – the correlation to child outcomes.

And particularly as you look at the data, you see a correlation between child outcomes and then some significant issues related to promoting early oral health with the children and families in your program. And they may relate it to health issues, attendance, and things of that nature. And then those indications, also in that discussion, that as a program you could be doing more to really use data to inform your program practices. And here you end up requesting help – help from the TA system.

So here you may also, in talking with your program specialist, ask for support from a grantee specialist to help you look at how you're using that data. And with that, you also have a discussion on how not only to integrate that data into your self-assessment and goals, but also have a conversation about how you can identify or reach out through your Health Service Advisory Committee to identify either our pediatric dentists or dental hygienists to sit on your Health Advisory Committee to help you further explore appropriate practices in early oral health. And then the grantee may use their dollars to secure services from a dental hygienist to work with programs on implementing preventive healthcare practices to provide oral healthcare education for their parents, etc.

So this is the way, once again, that we have our National Centers, our state T/TA centers, and direct T/TA funding all working together collaboratively to provide support for your program in achieving different goals. So, that's it in a nutshell – just an overview of our T/TA system. And then we'll have more questions later, but at this time I'd like to turn it over to Mary. And thank you.

Mary: Thank you so much, Damón. I'm sure that your examples were really helpful to people. And I'm sure that they're probably sitting there right now thinking up other examples of ways that they can integrate their – their T/TA resources that they have. So, I think having examples and being able to really think about some practical ways to use training and technical assistance will be really helpful to everyone. Now I'd like to introduce David Jones, who is the home visiting specialist from the Office of Head Start.

David Jones: Thank you, Mary. So welcome, everyone, again. I would like to begin by thanking Damón for explaining our T/TA system, the infrastructure, and just some of the approaches that the Office of Head Start uses to support our programs. Yvette sort of started us off with a little bit of information about the 2010 Patient Protection and Affordable Care Act and the allocation of funds that actually made MIECHV possible.

So what I would like to do right now is talk a little bit about the OHS home visiting team and some of the work that we've been doing in support of programs that are expanding – utilizing this funding. It was interesting to – to us to see that the, you know, funds come out and programs have to really respond really quickly. So the states that were interested in applying for these funds literally had to hit the ground running, reaching out to some of their collaborative partners across the state. That included entities such as the Department of Justice, Social Services programs, Child Abuse and Neglect, the Department of Health, the Department of Education, Maternal/Child Health, and of course Head Start just to name a few.

So, the work began with states conducting what's known as a community needs assessment. And with that, they basically had to identify and prioritize which at-risk communities and populations had the greatest need for services. Once these community needs assessments were submitted, they were reviewed by staff at the Office of Head Start who represent the model. And the states were asked, you know, to tweak certain things and basically – essentially submit updated state plans.

At that time, we would review the updated state plans that could have resulted in additional phone calls and conversations to make sure they understood our motto and that they were able to begin thinking about what fidelity would look like. For us, we required that all of the states that were interested in implementing our model acquire what was called a model approval letter prior to implementation. And in some instances, they even had to agree to work with us through the implementation process. Once this part was completed, the states began making decisions about benchmarks – the benchmark plans and what they were interested in measuring, and how they were thinking about doing so.

Representatives from the state lead organizations worked very closely with staff here at the Office of Head Start to better understand our model, what we meant by model fidelity, data that we collect within the PIR – and for those of you who may not be aware, the PIR is our Program Information Report – and to ensure that they would not make any adaptations to our model with some of their data collection requirements.

So to just talk a little bit about some of the training and technical assistance supports that we've provided thus far, I can tell you that my colleagues and I at the Central Office participate in frequent model developer calls addressing issues that are pertinent to all of the evidence-based models but more specifically, obviously, for the Office of Head Start and programs that are expanding using our home-based model. We also engaged in conversations with state leads in a number of the states throughout the country, some of whom are at different places in the funding process. The state leads were also engaged and supported in conversations regarding their specific T/TA needs because they had to outline and identify essentially what they thought some of those training and technical assistance needs were going to be.

Other supports provided to the state lead agency utilizing our model has basically been, again like I said earlier, reading and evaluating the updated state plans, assisting with some revisions to ensure model fidelity. We've organized calls with our RPMs, or regional program managers, essentially keeping them

abreast of the MIECHV program process and states within their regions that were applying for and actually receiving funding. If and when there were questions that were more region-specific, we would organize conference calls to have more focused discussions based upon their specific needs.

In addition to our Regional and Central Office supports, as Damón mentioned, our National Centers are poised to work collaboratively with Regional Offices to facilitate regional trainings as necessary. So one example for that would be a lot of the programs that are implementing and expanding through this initiative had some concerns around reflective supervision. So that would be one of those requests, again, that through one of our National Centers they could put in – a request in. If it's multiple programs within a region that's implementing our model through this funding, they would basically pull together what's called a regional training and all of the programs that are expanding would be able to participate in that.

We did something that was a little bit different and unique that Damón didn't mention for this specific funding allocation. Our RPMs, which is the regional program managers, decided that they would appoint someone specifically to sort of spearhead and – and lead regional T/TA requests. So we have within a region something called regional point of contacts, who are federal staff. And in most cases they volunteer, but in some instances they were nominated because of their expertise having a relevant infant/toddler background to essentially act as the point person within a region to coordinate and support MIECHV expansion and work closely with staff in the Central Office.

While our communication with the individual programs that are expanding with this funding has been limited to date, on occasion we will respond to specific questions or concerns that are in most cases initially generated or coordinated through our Regional Office. These conversations have covered topics such as training, recruitment and retention, home visitor caseload, home visitor burden, data entry, data collection, and reporting just to name a few. Other training and technical assistance supports... I think one of the things that was important for us, given that we have several staff in the office that's working on this initiative but we have varying roles, was to sort of explain and be really clear about what our roles and responsibilities are.

So, I'll begin with my role. My role as a member of the interagency home visiting team is to work collaboratively with other ACF federal partners. On our team we have representatives from OPRE; the Office of Child Abuse and Neglect; Administration for Children, Youth, and Families; the Office of Child Care; and obviously, the Office of Head Start. And basically, our goal or our role is to ensure that we are thinking collaboratively and holistically about ways to support programs that's expanding through this initiative. And that includes the state-funded programs as well as the tribal programs.

I participate in monthly meetings with this group. There are periodic meetings with HRSA and ACF team. And I also collaborate with federal and regional staff. Again, we consistently will read state plans if it's necessary, recommended modifications. We participate in and present at conferences. And we work to ensure that documents are cleared prior to use in webinars such as this.

Yvette Sanchez Fuentes, Angie Godfrey, and Christina Benjamin represent the Office of Head Start model, which entails frequent and consistent communication with MIECHV state leads, which are the grantees, including providing the model approval letters that I mentioned earlier. Communicating with RPMs and RPOs – RPMs are within our T/TA structure and RPOs are HRSA – the HRSA equivalent. Also, state collaboration directors are involved in some of these conversations and discussions. And we provide guidance and support to Early Head Start programs as they work with regional, state, and local

home visiting partners. They also present – participate and present in conferences. The regional point of contacts, in addition to what was discussed in the previous slide, they communicate and they coordinate all of the different T/TA requests, participate in conversations with program specialists and/or state leads as well as the technical liaison. And the regional T/TA lead basically coordinates requests and monitors all follow-up.

So with respect to the Head Start Program Performance Standards, one of the things that was really essential for us as we were working with the MIECHV state leads was to really engage them in conversation around model fidelity and what that meant. While programs implementing the home-based option must meet all of the Performance Standards, we place heavy emphasis on high quality, prevention and promotion activities, ensuring that they understand that they have to implement these programs so that they're developing positive relationships and that there's continuity of services; that they're engaging parents and they're actively involved in services; that they're thinking about inclusion; that their services are culturally competent, comprehensive, flexible, and very responsive; also, that they understand our process for transition planning and collaboration with community partners.

One of the things that we've also done in support of model fidelity, when questions come in about the Performance Standards, it's really we just clarify points of – of confusion sometimes. And then we interpret the Head Start Program Performance Standards just to ensure that programs are operating in the way that they should be. The home visitation supports and resources – there are a variety of resources that the EHS NRC provides for home visiting programs. And just to talk a little bit about what the home visitor's role is because I think, given that there are several different evidence-based models, the home visitor's role with respect to the Office of Head Start is very specific. So the home visitor's role primarily is to support and strengthen parents' or expectant parents' skills and abilities to nurture healthy development of children.

So, you know, again, it's not going in as an – as an expert, but really making sure that your scaffolding that parents' capacity and ability to do the work that they need to do to support their children's healthy development. The home visitor's responsibilities also are to ensure that they must maintain a caseload that's – of 10 to 12 families. It's really, really essential that you understand that the supervision and the supports that – that we expect that home visitors are provided is thoughtful about the number of families that they're carrying because we believe, in terms of ensuring model fidelity, that if they're carrying a caseload of more than 12 families that that's going to make it really difficult for them to provide the type of quality that we expect. And then home visitors should also introduce and arrange or make sure that they are collaborating – their services are collaborating with community partners.

So as the MIECHV program began to expand and – and we got to a place where programs were beginning to consider and think about delivering services within the office, we came up with the idea that we do something called implementation support site visits. And we kind of borrowed a little bit from the ACF and the agency home visiting team. Tribal – the team that was going out supporting tribal programs were – were doing a lot around implementation support, just going out and meeting with grantees and sort of exploring how they were thinking about delivering services. So we came up with this idea that we would do it for state programs.

Now we are going to conduct a very limited number of these visits, but I think part of the reason why we thought about doing this in this way is we recognize that there is a high level of communication, coordination, and collaboration required to ensure that the home visitation program is part of a statewide comprehensive system of early childhood services. And I know when we were reading the

state plans, it can look one way on paper but in actuality it can look very different. We're visionaries, and so a lot of times when you get to a place where you're actually implementing things can change.

So in order to provide additional supports and to really better understand actual implementation, we structured these implementation support site visits to learn how states, collaborative partners, and these Early Head Start programs are managing implementation. You know, it's kind of helpful to know who are the actual key players as opposed to who they wrote would be those key players in the state plans. What does the development of a centralized intake system entail and what are some of the pitfalls?

When we held our initial or the inaugural implementation support site visit, the meeting was held at a centralized location making it easy for all of the partners to – to get there. And typically, all of the staff that participated in the system of care are expected to be present at the meeting. And we had a really good turnout for the first meeting. There was some discussion of the initial state plan and an exploration of how some of the training and technical assistance needs that they initially identified might have changed because by the time you get to a place where you're delivering services there are some things that probably have changed. And you may not have as many training and technical assistance needs, but then you may have some more very specific needs that need to be addressed right away.

It provides the participants an opportunity to really learn a little bit about the roles and responsibilities of the key players in supporting their implementation. They have an opportunity to really give us feedback for new learning and some of the challenges. And then also, we do – we take some time to respond to questions around monitoring because I think that's been a question for several of the – the state grantees as well as the local programs.

And so to just kind of explain that a little bit, some of the states – the state leads, before they learned and understood what our regional supports were and what the infrastructure were – about T/TA system was, they were thinking that they would have to come out and monitor our programs on an annual basis, maybe every six months. And then when they realized the degree to which we provide supports and the degree to which we monitor our programs, they sort of pulled back and said well maybe we can just look at some of the reports or maybe we can just, you know, discuss – we can have periodic calls and that sort of thing.

So, I think just having the information about what we do and how we support these programs was really meaningful for a lot of the state leads. And then finally, the implementation support site visits provide us with an opportunity... Well, I want to just back up a little bit. One of the things that I think was really meaningful and instrumental is that collaboration is funny in the sense that when you know that you have to collaborate with people you can do it, but it really makes a difference when you're all in the same room and you're looking at each other face to face. It strengthens those bonds. People that have had meaningful conversations over the phone have an opportunity to kind of sit together and – and say, you know, this was really meaningful. We need to do this again.

And so, one of the things that came out of the implementation support site visit that we did in Georgia was the collaborative partners made a commitment to meeting on their own, without federal staff being present necessarily from the Central Office but from the Regional Office. And I think that was a really good thing, the fact that they were willing to do that and sustain it for themselves. So we would make recommendations about making sure that they're continuing to communicate with each other. And then we will make modifications as well based upon our new understanding when we go out to other regions

and other states in terms of what type of training and technical assistance supports we might need to provide.

So with that, the only other thing I'd like to say is that I mentioned monitoring specifically because in December – on December 17th, we're actually going to have a follow-up webinar that is going to go into a little bit more depth, that's going to explain the monitoring process for programs that's expanding to MIECHV. So look for that. There's – there's is going to be some information that's going to be coming forth and – December 17th. Yeah. And at this point in time, I guess we can begin to take questions.

Mary: Okay. Thank you very much, David. And – and thank you, everyone, for your participation. We have received some questions, and so we would like to be able to address them as – as we can. And any that we don't get to today we will be sure to pass along and receive answers to in the future, and they will be available on our website with the archive of the webinar. So, we will be able to answer these later. Any questions that we don't get to today we'll be able to answer later.

I think the first one might be for you, Damón. "How can I access training and technical assistance for my MIECHV home-based program?"

Damón: Thank you, Mary. So all of the programs expanding are existing Head Start or Early Head Start programs, and they have procedures in place for requesting T/TA. So, typically, you would – we would go ahead and essentially follow the same process. Programs will contact their program specialist, who will then talk with their technical liaison within the Regional Office, who then will work with the regional point of contact to ensure that T/TA requests are all handled by the appropriate entity.

One of the things I wanted to reiterate, before when we did the overview, is that with our National Centers, the – the Centers use the Early Head Start – I mean, the Early Childhood Learning and Knowledge Center to share materials and resources as well as National Center staff are also available to present at regional and national training events. And grantees may also contact the National Centers by using their respective email or phone numbers, which are also posted on the ECLKC. So I just wanted to make sure that you see that direct link in connection to the National Centers.

And I also want to reiterate as well, that with our T/TA specialists, every grantee has an ECE specialist or infant/toddler specialist, and they serve as their point of contact with the state T/TA system. So if you're aware of that person, you already have a direct connection to the state-based system. And then, he or she also has a connection to the Regional Office to provide additional support. And so, we just wanted to make sure that you're aware of that. And then also in those regions, they're assigned to really match you to your respective needs in your program.

However, if it is – if it is at the program level and if it's also something – I'm sorry, if it's at the program level and if it's something that would normally be handled by our T/TA system, that's how it will be addressed, through those connections that I just articulated. Also, if it's at the state level, there would be conversations between OHS Central Office and the regional point of contact, which David talked about earlier, and the state lead agency to decide the best way to respond. So those are the different connections, if you will, that you have to the TA system and how they could provide support to your MIECHV grants.

Mary: That's great. Thank you, Damón. Is there anything you'd like to add, David?

David: Nope. He covered it well.

Mary: Okay, good. I think the next one probably is for you, David. "What kind of support and technical assistance will states receive if they implement the Early Head Start home-based model?"

David: Okay, so many of the supports that we – we can provide obviously will depend upon the type of request. However, most are geared to ensure that states understand, again, model fidelity and that the impact of any adaptations – which we're not really supporting adaptations – are thoughtful about data collection related to benchmark and construct measurements.

So as stated earlier, clarification and interpretation of the Head Start Program Performance Standards is one of the ways in which we support states. But let's say we can go back to the monitoring issue. There was a program in – in California that had some concerns about monitoring and how – again, how frequently the state would need to monitor the Early Head Start program that's expanding. And so, our office sort of reached out to the state lead.

We had our regional point – point of contact on the phone, the regional program manager was on the phone, and even the program specialist. And we just kind of engaged in conversation. They each talked a little bit about their role with respect to how we support programs with our annual self-assessment, their refunding application, the fact that programs are monitored on a – you know, every three years.

And once the state leads got a better understanding about, again, how we monitor programs and how we provided supports, they sort of settled down and said, well, maybe we don't need to come out on a yearly basis. Maybe if we had an opportunity to look at the PIR reports that you get – which we can definitely send those out if people request them – then they get a better feel for how we're supporting the monitoring programs. And so when we walked away from that specific call, the state lead was very happy that that level of support and oversight was happening. They felt like, well, we can just communicate really closely with the program specialists to get any information that we needed. And they were also told that they could actually contact the programs directly, and that worked well.

Mary: Great. Thank you. I have a feeling there are probably a lot of questions about this next one. As we have been out training we hear this a lot, and so I'm sure they'll be happy to – to get an answer to this one. "What supports, if any, are there around data collection?"

David: Yeah, okay. I have to be very careful about how I respond to this one. Central Office staff have been engaged in many conversations with all of the state leads to ensure that the data collection requirements are within the scope of the service provision and will eliminate, to the degree possible, any duplication of data entry. You know, we're definitely concerned about home visitor burden and the additional workload that that will require.

I think an example was given earlier during Yvette's introduction about, you know, data in terms of the frequency through which an assessment that we're already using – the state may require our programs to administer it a little bit more frequently than we normally do. And so, that's a point – a place where we would actually have to have some dialog with the program, with the MIECHV state lead, just to make sure that it's something that's feasible and it's doable and it's – it's not going to change our model.

Mary: Okay. Thank you, David. "Can the Regional Office assist with questions related to data tracking, monitoring, and reporting?"

David: So again, the regional point of contact, as federal staff, would work really closely with the program specialist and the technical liaison, and they would be able to initially respond to inquiries related to data tracking, monitoring, and reporting. Most of this, again, will be decided at the state level based upon the state's expectations which have already been discussed with staff at the Central Office. So really, our role probably will be more of clarifying what's – what's feasible.

Mary: Okay. Thank you very much. Damón, did you have anything that you wanted to add?

Damón: No. Not at this time.

Mary: No? You're good? Okay. "Will our MIECHV program be monitored by the state lead agency?"

David: Okay. So since all of the programs expanding are preexisting Early Head Start or Head Start programs, the Office of Head Start is primarily responsible for monitoring MIECHV grantees according to their regular monitoring schedule. Review teams will be made aware of the agency's participation in the MIECHV expansion, so additional focus will be placed on looking at model fidelity as it relates to requirements associated with the MIECHV program. Some of the state lead agencies may require some additional level of oversight and reporting, and that will be negotiated within the regions.

Mary: Thank you, David. And I might want to, again, remind people that on December 17th from 3 to 4, we will be having a webinar specifically on monitoring, so please look for your email on – save the date and then register when the time comes. And we'll look forward to talking more about monitoring at that time.

"Can the MIECHV state lead discontinue our funding" – and this is also related to monitoring – "if the program has difficulty maintaining full enrollment or meeting benchmark requirements? Are there ways that the MIECHV state lead can influence the program's funding?"

David: Okay, so the short answer is yes, they actually could discontinue funding. But obviously, again, with the supports that we have in place through our T/TA system and our frequent communication with the state leads and the program specialists, we don't sort of anticipate that that would happen. Any program that has gone through this rigorous process of being accepted into this project I think are capable of really doing what's – what's needed to sustain the funding. If problems do arise, however, you know, the Regional and Central Office staff will engage in some dialog with the state lead agency, providing supporting guidance in an effort to, you know, ensure that the program does what it needs to do to maintain and sustain the funding.

Mary: Okay, great. I think we have time for one more question and then, as I mentioned, if we have not gotten to your question, we will be able to do that later when we send out that – we will be sending out the PowerPoint as well as other information. And it will be posted on the Early Childhood Learning and Knowledge website. "Who should we contact at the Office of Head Start for MIECHV-related questions?"

David: So for questions around home visiting in general, I would be the person that inquiries could be made to as the home visiting specialist. For questions that are specifically related to the Early Head Start home-based model in relationship to this expansion, inquiries should initially be made to Angie Godfrey, who's our infant/toddler program specialist, or Christina Benjamin, our special liaison to the Office of Head Start through the EHS NRC. But we all work very collaboratively, so if you reach out to either one

of us we would sort of, you know, have the meeting and discuss the concern and then we would get back to you as quickly as possible.

Mary: Well, thank you very much, David and Damón. And we need to thank Yvette also for joining us. It was, I think, very helpful to everyone to hear different voices about MIECHV. And hopefully you are able to utilize your training and technical assistance programs and – and resources that are after you – the webinar today. And we'll have those – see that – that percentage of people who are using their ECE specialist jump right up there. And we will be having, as I mentioned, another webinar in December on monitoring – December 17th from 3 to 4 p.m.

And I think you – you have found out a lot today about how to access your training and technical assistance resources that are available. And as I mentioned, if you had other questions, we will be responding to them at a later time. And you'll also be seeing this webinar posted on the website so you can go back to it and look at it at any time for reference. David or Damón, do you have any closing comments that you would like to make?

Damón: Thank you, Mary. I just want to just reiterate once again that the TA system is yours and it's at – at your disposal, if you will. Please continue to use our services. We're here to support you and we want to make sure. So once again get in contact with your – your state T/TA manager if you are familiar with that individual. But if nothing else, contact your program specialist and he or she will be able to connect you to the TA system itself. So we definitely want to make sure that you're aware of that resource.

Mary: Sounds good. David?

David: Yeah. Just on behalf of the Office of Head Start, I would like to just really thank all of the – the local programs that took this on and decided to expand. Any time we have an opportunity to service additional families that are in at risk, underserved communities, it really makes a difference. And – and I know sometimes people out there feel that home visiting is not a priority, but it is. And we really appreciate and respect the fact that you guys decided to take this on. So, please feel free to reach out to us if you have questions or concerns. We're really here to support your needs and make sure that we do this in a way that represents everything that Head Start stands for. So, thank you.

Mary: Thank you very much, David, Damón, and Yvette Sanchez Fuentes for your time today. And we will be following up, as I mentioned, with posting this on the website in the future, so keep an eye out for that.

Operator: We'll now turn this back over to Kelly Clare, our producer.

Kelly: Alright. Thank you, everyone. That concludes today's session. You can go ahead and log out. And thank you very much for attending today. Have a great day.

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