



February 5, 2019

To: Giannina Pérez, Senior Policy Advisor for Early Childhood, Office of Governor Gavin Newsom
Kris Perry, Deputy Secretary of the Health and Human Services Agency for Early Childhood Development and Senior Advisor on Implementation of Early Childhood Development Initiatives

From: First 5 Association, California Children & Families Foundation, First 5 Los Angeles

Re: Policy recommendations for home visiting expansion dollars in fiscal year 2019-20

Voluntary home visiting is an evidence-based service delivery approach that provides critical support to vulnerable children and their families. While home visiting models may vary in duration, curriculum, orientation, and eligibility, their foundational elements are consistent across all models: services are voluntary; responsive to individual family needs; and connect families to additional and appropriate community resources and eligible benefits. These outcomes yield impressive dividends to communities, states, tribes and the federal government not only in human capital but in reduced government expenditures.

We applaud the Administration's demonstrated commitment to home visiting services by dedicating an additional \$100 million to strengthen and expand California's home visiting infrastructure. We recommend the following proposals for that funding to ensure successful implementation at the local level and maximum impact for children and families:

Expand the California Home Visiting Program to a larger pool of counties. The federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program recognizes 18 home visiting models and allows up to 25% of funds to be used for promising practices not yet considered evidence-based. When California began receiving those funds to create its California Home Visiting Program (CHVP), it chose only two of these models – Nurse Family Partnership and Healthy Families America – to fund at the local level. Counties with those models in place were eligible to receive the federal funding. As a result, many counties with high quality home visiting programs that qualify under the federal rules were left out of California's program. The State should adopt the federal guidelines to allow 25% of CHVP funds to support innovative home visiting models and to allow more evidence-based models currently used throughout California to receive funding. Expansion of eligible programs would open eligibility up to many additional counties and greatly increase the number of families receiving services. Only twenty-two counties currently receive CHVP funding.

Dedicate resources to cross-agency coordination. The need for coordination – on data collection and evaluation, training, and communication with counties – is essential for success of the two state-administered home visiting programs. We applaud Governor Newsom’s dedication of recommend consideration of new staff at CHHS to support implementation of his early childhood development agenda. An opportunity exists for the CHHS to support alignment across the CDPH and DSS home visiting offices and to maximize federal funding leveraging opportunities. CHHS has a critical role in strengthening the connection between the Medi-Cal managed care system and home visiting, and creating long-term sustainability strategies.

Local coordination grants for CalWORKs Home Visiting Initiative counties. The CalWORKs Home Visiting Initiative (HVI) is a new program for California, with forty-four counties just launching their local efforts. County departments of social services are tasked with coordinating with departments of public health and/or First 5s to provide home visiting to CalWORKs parents with young children. To ensure that the program is successful and enrolls participants as quickly as possible, we recommend that investments be made to improve local coordination efforts. Local coordination grants could greatly enhance the coordination across home visiting systems where multiple efforts exist.

Workforce development and innovation. Workforce support for home visiting professionals is critical to the quality, expansion, and sustainability of these programs. We recommend that funding be dedicated to the study of workforce expansion with a goal of building a more consistent workforce infrastructure, based on learnings from other home and community based programs and specific home visiting examples being piloted in Los Angeles County and other states like Illinois.

Implement funding to maximize child outcomes and build the foundation for family supports. The majority of the Governor’s budget proposal for home visiting is dedicated to the new CalWORKs Home Visiting Initiative. Because that program is still in its initial implementation phase, we recommend the Administration consider a few approaches to implementing funding:

- Use some of this allocation to make innovation grants to counties testing innovative multidisciplinary models, model enhancements, or embedded services. Some examples include evidence informed legal aid partnerships, doulas, embedded mental health and substance abuse services, and other services which connect families to other community services and supports.
- Frontload FY 19-20 HVI funding to support state and local systems building activities recommended in this memo. The HVI program is currently in the process of launching its first year of implementation. Directing a portion of new HVI funding to systems building activities early in FY 19-20 would help build the capacity of counties to prepare to serve more families. Funding for HVI service expansion should align with current program implementation timelines.

- Clarify that First 5s are eligible entities to receive state home visiting funding. Many local counties have chosen to partner with their local First 5 agency to implement HVI and MIECVH home visiting programs because of First 5 contracting flexibility and existing connection to service providers in the community. Clarifying that First 5s, as public county agencies, are eligible to receive state funds in partnership with lead county social services and public health agencies would help ensure that those counties who choose to work with their First 5 partners to implement home visiting programs are able to expedite implementation and expansion of state-funded programs.

We look forward to further discussions with the Administration about how to continue to strengthen the system of home visiting and its reach to a larger pool of vulnerable families in the years to come. In future budget discussions, we hope to elevate the need for data systems that work across State agencies to track families served, and their outcomes. We also look forward to a discussion of universal systems of connections for new parents, as well as expanding the population of parents offered home visiting, like those involved in the probation system.