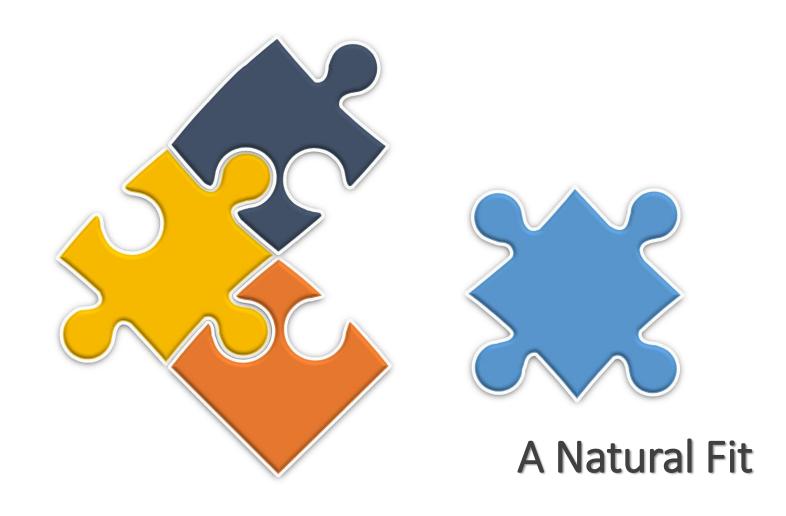
Home Visiting and 2-Generation Initiatives



Duane Yoder, President, Gregan Crawford, Director Strategic Initiatives Garrett County Community Action Committee, Inc



Building better lives, stronger communities – together

What Will Be Covered

- Definitions
 - 2-Generation, 2-Gen, 2-G
 - Rural IMPACT
 - Home visiting sets 2-G in motion
- Support for 2G
 - Foundations
 - Federal
 - States
- Designing and Operating a 2G Initiative.

Early Childhood Adversity

- More adverse experiences in childhood
 - greater likelihood of developmental delays and other problems
 - more likely to have health problems in adulthood (e.g., alcoholism, depression, heart disease, diabetes and other chronic diseases).
- Research is also showing that it can disrupt early brain development and compromise functioning of the nervous and immune systems.

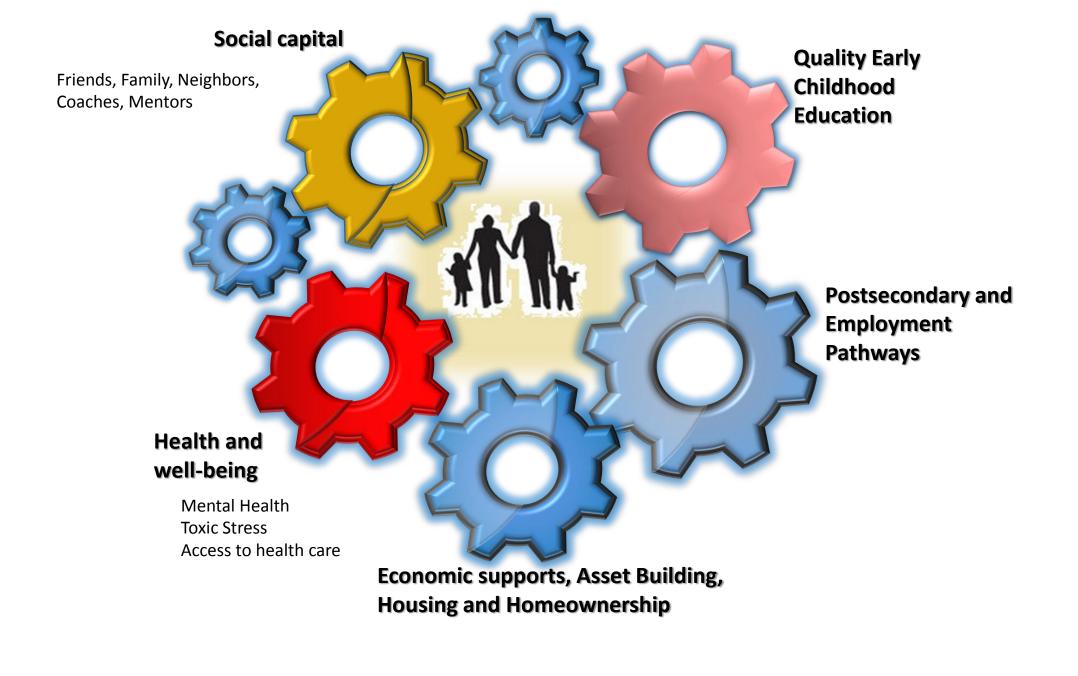
Toxic Stress

- A "toxic stress" response can occur when a child experiences
 - strong, frequent, and/or prolonged adversity
 - without enough adult support.

- Can lead to permanent changes in the development of the brain, causing psychological and physical damage.
- Appropriate support and intervention can help in returning the stress response system back to normal.

Interest in 2G

- Rural IMPACT
- Foundations
- HHS Administration for Children and Families
- States
 - NACO
 - Maryland DHR, DLLR
 - Utah and Conn.



Operational Framework

Focus activities on steps that lead to greater economic security/independence

- Stabilize persons in crises
 - Crises intervention
 - Bundling services to alleviate crises
 - Family Goal Setting / Pathway Plan
- Assist family or person to create a Pathway Plan to assets
 - Continue Bundling services to support Pathway Plan
 - Financial literacy , coaching
 - Education and career advancement
 - Acquiring assets –savings, homeownership, energy
- Work to remove barriers and create opportunities
 - Housing and economic development
 - Workforce development
 - Policy
 - Municipal and community capacity
 - Fill Bundling gaps

What is bundling?

Working definition: Bundling is the integration or grouping or offering of 2 or more services or programs based upon assessment and goals of the participant.

Crisis to Thrive Scale C2T

Crisis to Thriving Scale: Short Form

Revised 8/14/14

5 Primary Domains

CRISIS	VULNERABLE	SAFE	STABLE	THRIVING	
ood & Nutrition					
Has less than a day of food and ited ability/means to prepare or ok food 3. Consistently unable to meet basic food needs; often didn't have enough food to eat in the past 3 months		Eligible for partial food stamps or subsidies but not receiving them	Receives occasional food assistance (brown bag, commodities); not eligibile for food stamps	Can choose to shop at store of choice, never reduces meal size or skips meals b/c of money, and sometimes has money to eat out.	
2. Has less than a of day of food available and no money to ourchase more	Without food stamps or other food subsidies, would often not have enough food to eat	Receives partial food stamps or subsidies to meet basic food needs	Can meet all basic food needs (does not skip or reduce meals b/c of lack of money) without assistance; but no extras and very little/no eating out	10. Can shop at store of choice and purchase any food items desired	
lousing					
l. Literally homeless	3. Legal threat of eviction (5-day 5. Receiving to rent/mortgage foreclosure received within		7. In stable housing (rent or own) that is not affordable (> 40% on housing costs)	Household is in safe, affordable, unsubsidized rental housing of choice	
2. In an emergency shelter or hotel	Transitional housing OR staying with others OR foreclosure notice	6. In stable subsidized housing	Household is in safe, affordable, unsubsidized housing	10. Household is in safe, affordable, home they own	
Childcare (all children in house)	noldif childcare not available for	one child or not affordable for eve	n one of the children then answer a	ccordingly)	
l. Childcare not available for all children in the household	Childcare available in unlicensed facility	Subsidized, safe childcare is available but not satisfied with it	Safe, affordable, unsubsidized childcare available but not satisfied with it	Safe, reliable care from family or friends and satisfied with it	
2. Childcare available but can not afford it	6. Subsidized, re available but can not 4. Childcare is unreliable (unreliable including qualit family or friends) education like the and satisfied		Safe, affordable, unsubsidized childcare available & satisfied with it	10. Safe quality care that includes early childhood education from licensed facility is available and affordable (including HeadStart, Early Headstart, Center based)	
Fransportation (answer from pe	erspective of household)				
I. No means of transportation and public transport not available when needed	3. Relies exclusively on transportation from friends or family	Has a single unreliable vehicle or vehicle(s) that needs minor repairs to run	Vehicle is reliable but older or unaffordable and there is no alternative	Has at least one reliable and affordable vehicle and back up transportation	
2. Own an inoperable vehicle and no funds to fix it	Has a vehicle but no insurance and/or no license	Has two (or more vehicles) but all vehicles are unreliable	No alternative transportation if primary source is unavailable.	10. Has sufficient number of reliable and affordable vehicles for family	
inancial \$ Management					
l. Not able to pay bills or past due febts	Paying all current bills, not paying past due debts	Paying current bills; paying mininum on debt	Paying all current bills, paying off debts most months and not saving regularly	Always paying all current bills and debts, NOTsaving regularly	
2. Paying some bills but late/not paying others		6. Paying all current bills, following plan to pay off debts	Paying all current bills, paying off debts most months, saving regularly	10. Always paying all current bills and debts, and saving regularly	



Family Stability Well Being		II Being	Education and Training	Financial Ma	anagement	Career Management	School Readiness/Child Development			
Housing	Child/ Children	Health and Behavioral health	Social Networks	Educational Attainment	Savings	Debts	Earnings level	Child Development	Attendance	
No subsidy, housing cost less than 1/3	Child/Children's needs met; serving as no barrier to parent/guardian school or work	Fully engaged in work, school, and/or family with no Health/behavioral issues.	Advocate/Networker: Uses own and other resources and connections to advance the mobility goals of others	Completed bachelor's degree or higher	Savings of three month expenses or more	Current on all balances and no outstanding debt other than mortgage or educational and/or car loans	Job with earnings>= index wage i.e. 1 adult,2 children>\$47,000	Child meets the widely held expectations for their age according to the school reporting data or shows progress on identified educational plan. Child is up to date immunization and dental exam and attends regular schedule visits	Child attendance = 95% or better for the school year	
No subsidy: housing costs exceed 1/3 household take home pay	Child/Children's needs serving as minimal disruption to parent/guardian school or work	Minimal disruption to work, school, and/or family due to health/behavioral health issues	Developed Network: Consistent source of both support and leveraging connections	Completed associate's degree or postsecondary job training or certificate program	Savings of more than two months expenses but less than three months expenses	Current in payments and plans and paying more than minimum payments	Job with earnings of 66-99% of index wage. i.e. 1 adult, 2 children=\$35,250	Child meeting developmental milestones for their age according to the ASQ developmental screening/school reported data or a referral for intervention is in process. Child is up to date immunization and dental exam and attends regular schedule visits	Child attendance = 85% or better for the school year	
Partial subsidy: paying \$200 or more towards rent	Child/Children's needs serving as intermittent disruption to parent/guardian school or work	Intermittent disruptions to work, school, and /or family due to health behavioral health issues	Emerging network: Consistent source of support and occasional leveraging connections	Attending college or postsecondary job training program	Savings of at least one month and up to two months expenses.	Structured payment plans in place and meeting minimum payments	Job with earnings of between 33%-65% of wage index. i.e. 1 adult,2 children \$23,500	Child screened through the ASQ developmental screening or the child health check (physical from their doctor) and areas of developmental concern identified. Child is up to date on immunizations and dental exams.	Child attendance = 75% or better for the school year	
Full subsidy: permanent nousing paying \$200 or less towards rent	Child/Children's needs serving as significant obstacle to parent/guardian school or work	Regular and recurring disruptions to work, school, and /or family due to health/behavior health issues.	Limited network: Occasional source of support	Completed postsecondary remedial education classes, college preparatory program prerequisites for job training/readiness program	less than one month expenses	Debts in excess of ability to pay, behind in payments	Job with earnings less than 33% of wage index. i.e ladult, 2 children = \$11,750	All children in the home are enrolled in an educational program or school and have a medical home	Child attendance = 65% or better for the school year	
Homeless	Recently emergent or not yet addressed dependent needs, requiring additional attention	Severely limited engagement in work, school, and/or family due to significant health/behavioral health issues	Isolated or draining network	Attending postsecondary remedial education classes, college preparatory program or fulfilling parequisites for job training/readiness program High school diploma or GED obtained No high school diploma or GED	No savings Monthly active budget completed	Defaults or nonpayment on all or most	Unemployed	Unidentified child development needs – no child health check or developmental screening	Child not yet enrolled in a child care program	

Family Service – Crisis to Thrive Progress

Client Scale Progress Report for 8/26/2013 to 7/28/2014, All Clients For Case Workers: Morgan, Diana

Monday, August 4, 2014 Page 1

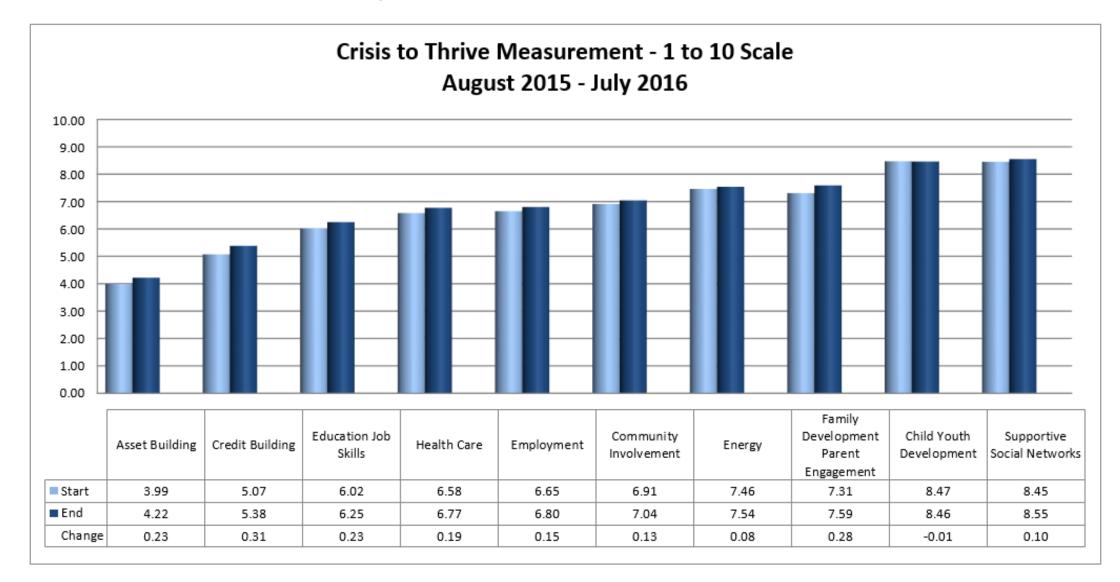
Name/ Case Worker SS#	Date	Employment	Financial Management	Food Nutrition	Housing	Health Care	Transportation	Childcare	Child Youth Development	Education Job Skills							Annual Income	% Poverty
Family: 7	Start/End																	
Dil , Ja	11/12/2013	6	9	6	9.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
Morgan, Diana	6/17/2014	7	9	6	3.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
Ro , Mo.	11/12/2013	6	9	6	9.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
Morgan, Diana	6/17/2014	7	9	6	3.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
Sc , Th	11/12/2013	6	9	6	9.00	6.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
Morgan, Diana	6/17/2014	7	9	6	3.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
Sc. , To Morgan, Diana	11/12/2013	6	9	6	9.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00
	6/17/2014	7	9	6	3.00	3.00	3.00	9.00	3.00	5.00	0	0	0	0	0	0	\$20,196	85.00

Category	Start	End	Change	# Evaluated
Employment	6.64	6.97	0.33	33
Financial Management	6.81	6.81		31
Food Nutrition	7.47	7.50	0.03	32
Housing	8.15	8.18	0.03	33
Health Care	6.91	7.00	0.09	33
Transportation	8.09	8.15	0.06	33
Childcare	8.66	9.14	0.48	29
Child Youth Development	8.77	8.92	0.15	13
Education Job Skills	6.56	6.59	0.03	32
				0
				0

In Crisis
Vulnerable
Safe
Stable
Thriving

Positive
Negative

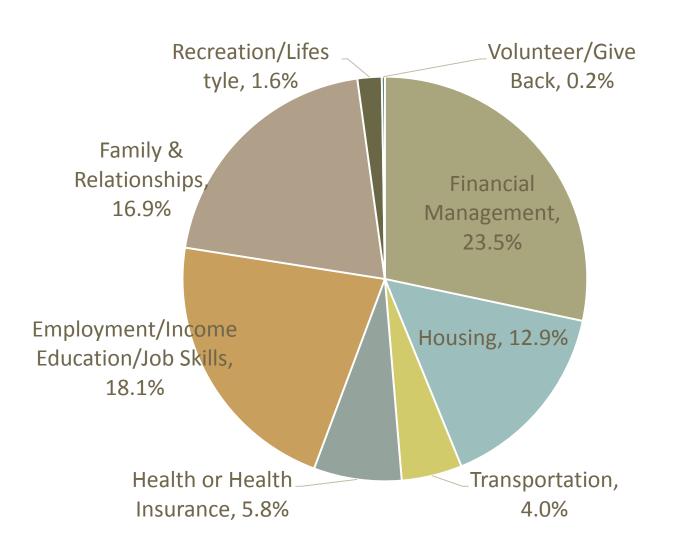
Crisis to Thrive Measurement and Pathway Plan Goal Dimensions



2G Parent Employment

	December 2014 Submission	October 2015 Submission
Not Recorded	6%	1%
Unemployed (Seeking Work)	22%	16%
Employed (All Types)	47%	58%

Areas of Interest Identified by 2-G Families Completing Pathway Plans



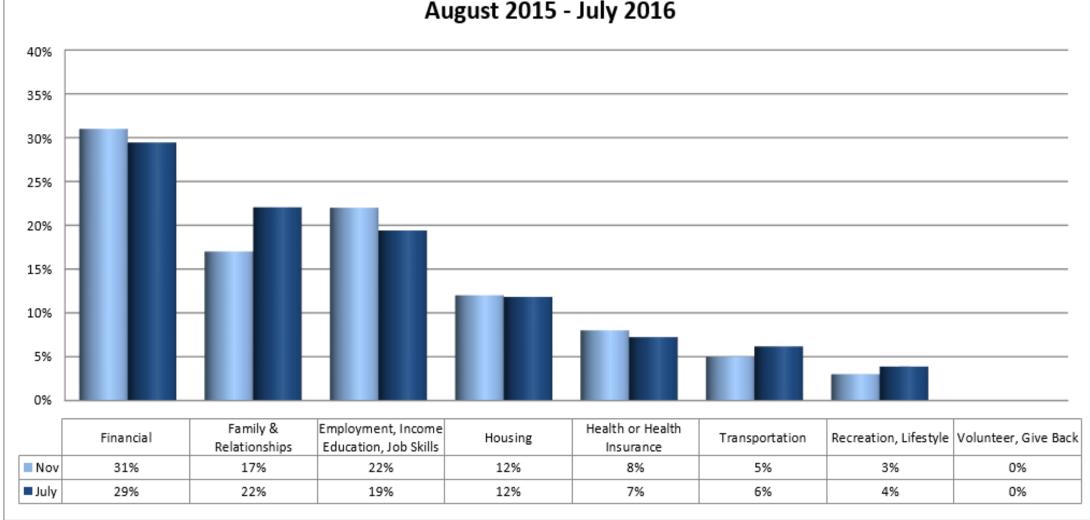
Family Goal Setting as an Integrating Mechanism

Invite **all families** to create goals using existing services to support their efforts

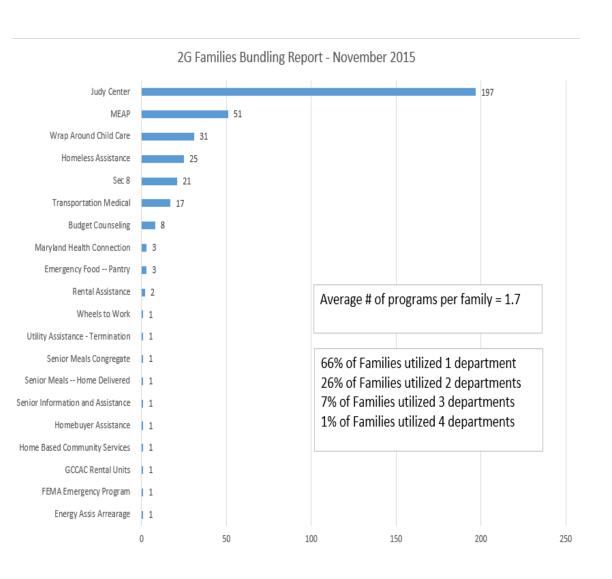
- Vehicle for Identifying Services and moving families toward economic self sufficiency
- Goals and action steps based on Crisis to Thrive Scale
- Electronic format that all are invited to engage in

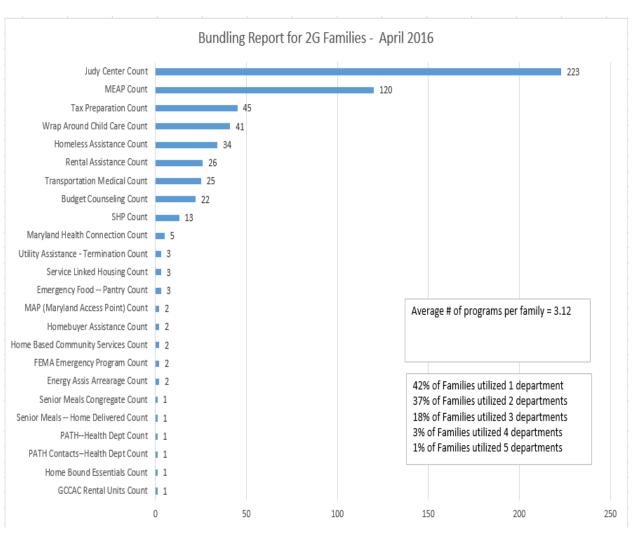
Goals are *Family Generated* with coach assistance

Pathway Goal Dimensions August 2015 - July 2016



Bundling Over Time





The Take Away

Right mix of services, programs and alignments based upon participant need(s)

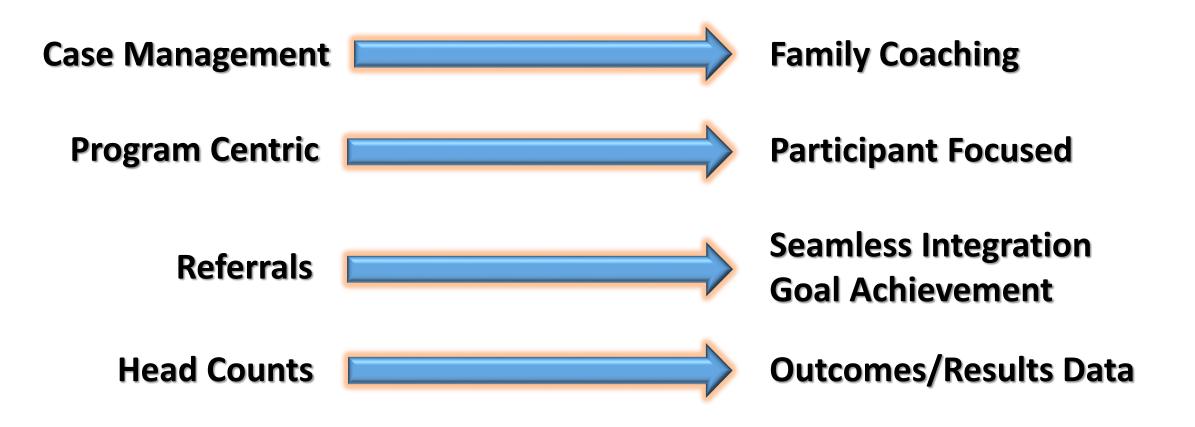
fosters achievement.

Data

If you want to shift to a more 'results-oriented' approach, then people at multiple levels of the agency have to understand results and ask about results

- Department data meetings—data quality and what does this mean
- Data and Contract Manager Position
- Funder reports
- Outcomes meeting
- Bundling Meetings

What's Different?



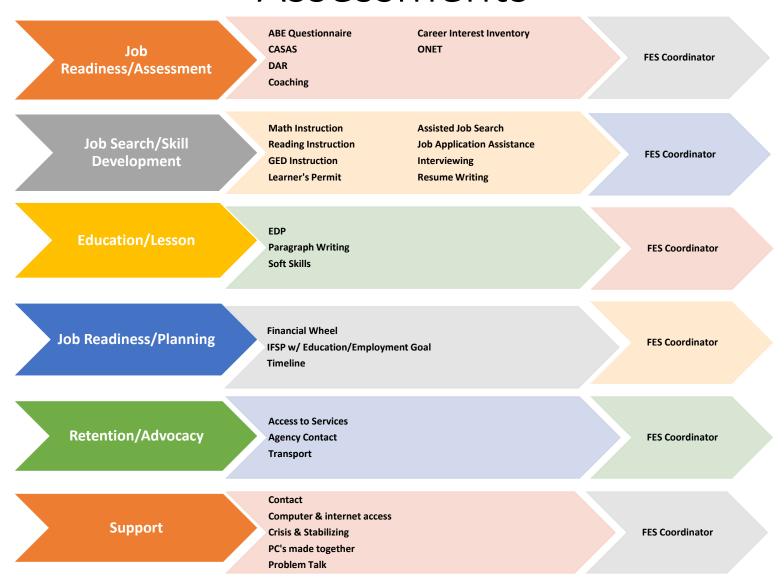
Examples of the Home Visiting—2-G Connection

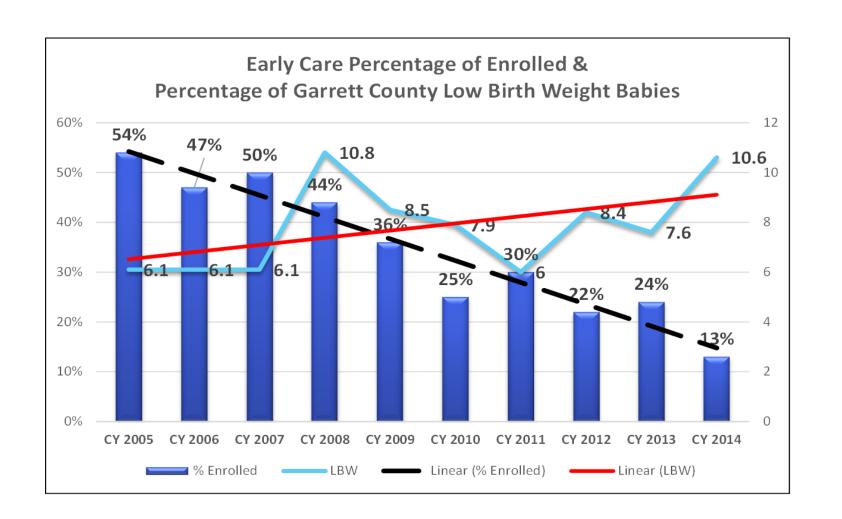
- Most 2 Generation programs have their history in early child development initiatives:
 - Head Start and Early Head Start
 - Healthy Families
 - All Our Kin—Connecticut--\$1 spent yields \$15 economic benefits
 - Even Start—Connecticut—Family income increased by 40%, 63% increase in home ownership, 29% decrease in rental assistance, 81% increase in voting
 - **Right from the Start**—Utah— Nurse Family Partnership, Education and training for mothers and 2 years quality preschool for children beginning at 3 years old

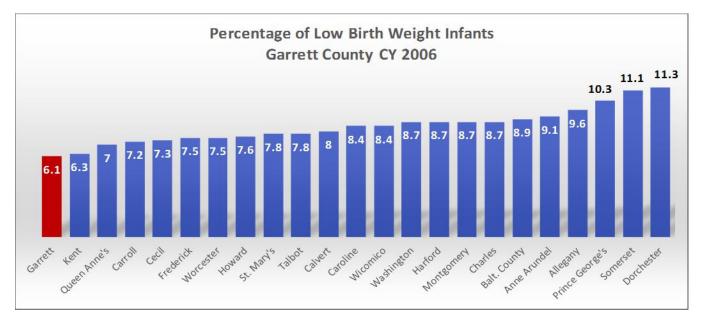
Crisis to Thrive Measures for Child & Youth Development Health Insurance

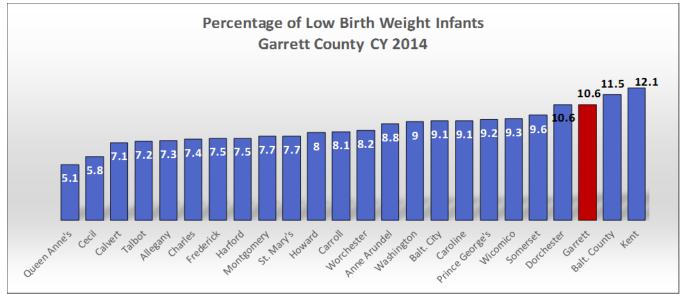
CRISIS	VULNERABLE	JLNERABLE SAFE		THRIVING
Child & Youth Development (ans	wer with all children in household	in mind; moving up the scale if it	is true for any one child in housel	nold then select that option)
Child w/ identified behavioral or developmental issues not receiving assistance	Child with developmental / behavioral needs receiving assistance			
Child not attending school or other socialization regularly	Child failing multiple classes or more than one child failing any classes	6. Child is failing a class	8. All children passing all courses	10. All children with GPA of 2.5 or better & or proficient
Health Insurance (answer from e	ntire household perspective. Mo	ving up scale if any is true of ever	one member of household then s	select that response)
Have immediate unmet health needs AND no insurance coverage	No medical insurance coverage BUT no current health issues	5. Some household members have coverage; and others receive needed basic care through subsidized clinic	7. All covered by high deductible private insurance, generally don't receive preventative care	Covered by private insurance w/ low co-pays and deductibles
No means to fill immediate needed prescription	Some household members have medical coverage; others have no immediate health issues	All are covered by federal or state insurance programs	Covered by private insurance, but care strains budget	10. Covered by private insurance w/ low co-pays, deductibles & prescription coverage

GC Health Department – Home Visiting Assessments





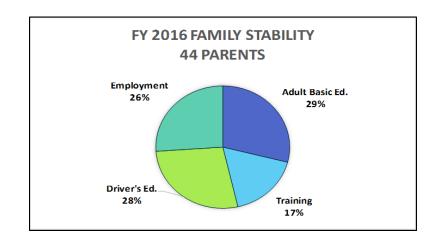




Stability Results for Families in GC Home Visiting

61% of Parents Achieved Their Family Stability Goal:

- 50% (9/18) Obtained Employment
- 25% (5/20) Received GED/External Diploma
- 17% (2/12) Certification/Training
- 4 Obtained Learner's Permit
- 4 Completed Driver's Education Classes
- 2 Obtained Driver's Licenses
- 1 Completed Driving Test through CAC



What Makes It 2-Generation and Not Just Referrals

- Family Centered not programmatic
- Coaching approach with cross coordination
- Family centered goal making acts as coordinating tool—Identifies Services Needed to Support
- Joint meetings and focus on families both inside GCCAC and with partners
- Focus on the seamless integration of services
- Outcomes data and data regularly reviewed for continuous improvement

Capacity for 2-Gen—Staff Related Elements

- 2-G requires knowledge and willingness to support multiple programs
- Coaching is a holistic practice
- Coaching relies on relationship building and trust
- Data and outcomes must be shared with staff
- Sustaining the support for staff and programming

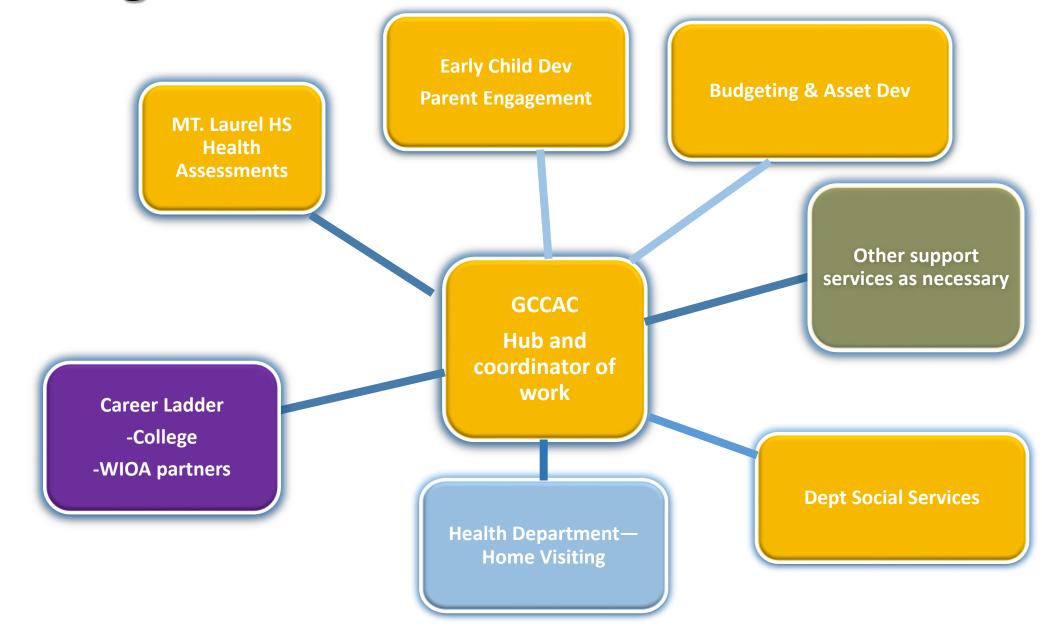
Capacity to 2-G — Structure Related Elements

- Management Information Systems (MIS)
- Defined data
- Partners

HOW?

- □Aligning existing program resources and fitting them together
- □ Existing staff become effective, knowledgeable coaches who help families access necessary resources
- □Sharing data across programs within an agency and among partner agencies serving the same families

GCCAC 2G Agencies and Partners



2G at Garrett County Community Action Today

- Universal Intake Process used throughout the agency
 - · Sufficient information to allow a presumptive eligibility report to be provided to and reviewed by participant
 - No wrong door
 - Intake for different programs can be done at any site or in home
- Use of crises to thrive scale across multiple dimensions
 - Self assessment/engagement
 - · Community needs
 - Tracks progress with families
- Families participate in pathway planning with focus on aspirations and economic security
 - Tool for integrating and bundling services.
 - Concrete way to identify interests and celebrate successes
 - Same pathway plan used by all programs
 - Pathway participants will see their pathway plans and progress they have made
- Staff trained and evaluated in use of Coaching techniques
 - Move away from case management
 - Motivational
- Financial managing/budgeting embedded in all activities.
 - Sustained training and review for all front line staff
 - Inclusive of partner staff

Garrett County Community Action Committee, Inc.

www.garrettcac.org



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