National Home Visiting Summit: A Place to Build and Grow Community

National Home Visiting Network Network Principles in Action

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In 2017, coordination of the National Home Visiting Summit shifted from the Pew Charitable Trust to Start Early (formerly the Ounce of Prevention Fund). The Summit had been a hallmark of Pew's fiveyear Home Visiting campaign, and with the guidance and support of a Steering Committee, was modeled after similar summits designed by Kay Johnson for the National Initiative on Preconception Health and Health Care (2004-2011). The Summit was to be a *marketplace for ideas* where leaders in the field could gain new insights that could help to *lift all boats*. "We wanted it to be a place where leaders could talk about the substance of the work they were doing, and how they could do it better," said Judith Van Ginkel, who along with Johnson organized the Summit. With Pew exiting the home visiting space and needs for sharing of best practices continuing to be a priority for the field, Start Early stepped into the role as steward of the Summit and from the start employed a network mindset to shape the work.

Keeping the great work of Pew in mind, Start Early strove to create a familiar Summit experience that would continue to be a catalyst for field building investments, while also facilitating strong partnerships between local, state and national leaders. They wanted the Summit to provide a space where those invested in home visiting could share cutting edge research, advocacy and policy efforts, new program innovations and systems building efforts, and they knew that they would need strong collaborative partnerships to make it happen.

Today, a Steering Committee of more than 20 people representing practice, academia, research, advocacy, and policy work year-round to measure the pulse of the field, scout innovations, and anticipate new directions that could benefit the home visiting community. A bi-directional flow of information is created between the field and those planning the Summit. The Steering Committee members are connectors and see their role as supporting the larger web of activity. Kelly Woodlock, one of the facilitators of the Summit reflects, "The Steering Committee members value being part of something bigger. They use their expertise to act as ambassadors, and they also roll up their sleeves and help to review workshop proposals, moderate sessions, debrief to ensure they are constantly learning and evolving in ways that benefit the field." And indeed the field is hungry for this

information. Attendance at the Summit in 2020 topped more than 700, and a live stream option connected another 1000.

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To extend the learning and networking experience beyond the Summit, Communities of Practice (COP) were created to provide another opportunity for Summit participants to connect with colleagues around specific interests and to consider how to utilize the information shared to further strengthen their own state, community, and program systems. Current COPs include (1) professional development; (2) policy/advocacy; and (3) network weaver. In the first round, there was also a COP on home visiting linkages to health services. Each is structured differently with webinars throughout the year and in-person gatherings at the Summit as a common thread.

The Professional Development COP has been structured in a way that supports collaborative learning and resource development, the latter being a step beyond what most COPs typically accomplish. When Janelle Weldin-Frisch was identified to be a co-facilitator, she considered the broad charge and varied audience and developed a structure that would support gathering information during the first year from the community (e.g., what are the professional development challenges, who is doing what). That survey then informed the development of a paper that highlighted challenges in the field that could be addressed in the following years. With approximately 300 people registered as members of the COP, and a relatively consistent showing of approximately 40 on the scheduled webinars, Weldin-Frisch still wanted to create an opportunity for even deeper engagement on the issues and co-creation of solutions. She introduced the concept of project teams and launched those in year two. Project teams are closed groups of approximately 8 to 10 people that agree to come together over a two-year span for structured phone conversations (approximately four to six per year lasting 1-1.5 hours) where they take a closer look at a topic (e.g., coaching, training, continuous quality improvement) and ultimately develop recommendations for future research and a paper and poster that they share at the Summit. Each team has a leader from its members who facilitates the meetings. According to Weldin-Frisch, "The magic in these projects is bringing people together with diverse areas of expertise who would otherwise not be in each other's circle... While the members of the coaching project team believe in infant mental health, they were not familiar with how it actually works at a program level. So I suggested we bring into the team Nichole Paradis, Executive Director of the Alliance for the Advancement of Infant Mental Health.

Doing so meant that we added a whole sector of coaching that was not part of the original conversations. And, this gave Nichole a line of sight to work with other team members thus building connection for her with researchers in home visiting and even Early Head Start."

The ripples extend beyond the COPs and their work products. "The Summit sets up a context in which people see their role in the mission and not just their organization," said Johnson.

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With a commitment to continuous improvement, those interviewed highlight a few considerations that they hope to address through the Summit in future years.

- *Equity.* It is important to continue to strengthen the equity lens as an intentional part of the Summit. This is important for many reasons, including but not limited to, the need for the home visiting workforce to improve cultural competence and reduce implicit bias, and to ensure home visiting programs respect, serve, and retain families from different cultural backgrounds. As part of this, attention needs to be given to how, for example, parent voice is incorporated, and how geographic representation (e.g., rural communities or highly underresourced areas as well as urban centers) is considered throughout the entire planning and implementation cycle. Ensuring that the Steering Committee is representative of the diverse perspectives and experiences in the field is necessary.
- *Systems Building.* Given that a guiding principle of the Summit is to create space for systems building, it is important to look for more ways to expand participation beyond home visiting to include a wide variety of other sectors such as child welfare, early intervention, primary care and pediatrics, and others.
- Business Leaders and Political Decisionmakers. Van Ginkel recalls that the original Summit planning emphasized engagement of the business community so that business leaders would understand the importance of the first 1,000 days of a child's life and the contribution of home visiting. She hopes that the connection to the business community can again be integrated into future Summits. Similarly, she hopes that the Summit can engage political decisionmakers. Regardless of political affiliation, leaders need to know why starting early to support young children and their families is a wise investment.

Woodlock reflects on the network principles at play. "We try to encompass all of the principles. Certainly this is about *mission, not organization*. From the start, we saw ourselves as stewards of the Summit, not owners. We ultimately see this as a mechanism to support systems development in the early childhood space. And the Steering Committee demonstrates the principle of *node, not hub* as they bring information together and push it back out so that the information lives with the folks in the field." Says Woodlock, "It's a big small world we live in and having the opportunity to cross paths opens opportunities for connection and collaboration. There is a different level of trust that is built over repeated experiences of coming together and being in a space that encourages you to share your voice. We can be vulnerable and say we don't know an answer and ask for help."

Written by: Deborah Roderick Stark, National Home Visiting Network

Based on interviews and written communication with Janelle Weldin-Frisch a consultant to Start Early;* Kay Johnson of Johnson Consulting Group, Inc.; Judith Van Ginkel of Every Child Succeeds, Kelly Woodlock of Start Early.

*Prior to the release of this publication the Ounce of Prevention Fund rebranded and is now known as Start Early.