



Siskiyou County Regional Home Visiting Coordination & System Building Year 3 Systems Survey Summary December 2019

Context

Beginning in early 2016, The Ford Family Foundation began funding a Regional Home Visiting Systems Coordination (HVSC) project. The vision for the project is for Douglas, Coos, and Siskiyou counties, and their affiliated counties, to have a coordinated home visiting (HV) system that strengthens and benefits all home visiting models as part of each region’s birth-to-five early childhood development system. The long-term goal for the project is to improve outcomes for families and expand the region’s capacity to serve more families.

The HV Systems Survey was developed to gather information about key aspects of the current HV systems, project governance, communication, and collaborative partnerships. The information summarized here shows survey results at baseline and annually at one, two and three years after project start.

The project evaluation team distributed the most recent survey at the HV Collaborative convening in Roseburg in September 2019 and distributed an electronic survey to HV System Coordinators in each region, who invited stakeholders not present at the convening to participate electronically. The survey was available in English and Spanish.

Survey Participants

Nineteen (19) stakeholders from Siskiyou County, California participated in the Systems Survey at Year 3. This is a 68% response rate, based on the number of stakeholders who were invited to participate.

Additional information about participants is reported in the Appendix.

Table 1 shows the counties served by organizations represented by survey respondents.

Table 1. Counties Served by Respondent Organizations

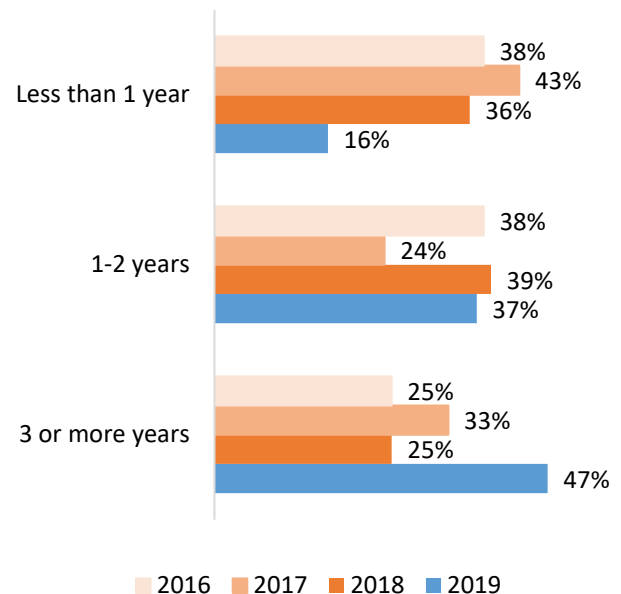
County Served	Respondents			
	2016 (Baseline)	2017 (Y1)	2018 (Y2)	2019 (Y3)
Klamath	0	0	1	0
Lake	0	0	1	1
Modoc	0	0	0	1
Siskiyou	10	21	29	18
Shasta	0	0	0	1

Current Level of HV Coordination

Strengths

A total of 9 respondents (47%) reported that they participate in cross-program HV or early childhood collaborative or governance groups. This is lower compared to baseline (80%) and Year 1 (67%), but similar to Year 2 (46%).

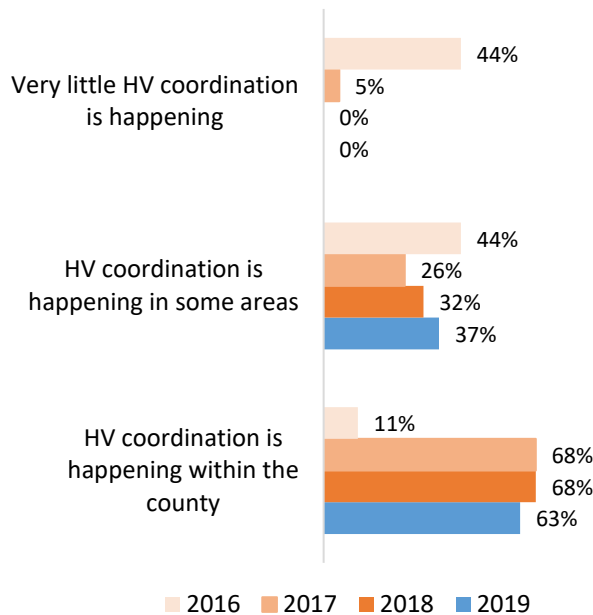
Figure 1. Length of Time Respondents Have Been Working on Improving HV Coordination



More respondents have been working on improving HV coordination for three or more years, compared to baseline. This could suggest that many stakeholders are remaining engaged in this work in an ongoing way.

Respondents rated the level of HV coordination work in Siskiyou County as shown in Figure 1. The majority of respondents (63%) continue to report that coordination is happening throughout the county at Year 3 of the project.

Figure 2. Current Level of HV Coordination in the County



Survey Domains

The following tables present the percent of respondents who “Agree” or “Strongly Agree” with each of the survey items. Survey items are grouped into different domains that comprise effective HV collaborative groups and a coordinated HV system:

- Communication and collaboration
- Governance and planning
- Roles and responsibilities
- Equity

- Continuous program improvement and data use
- Systems outcomes in the areas of (a) community awareness, (b) referral process, and (c) professional development
- Sustainability

Although there were 19 total respondents, the number of valid responses for each item may vary due to respondents skipping items or reporting they “Don’t know”; these cases are omitted in the calculation of percentages.

Communication & Collaboration

Strengths

- There is a high level of respect and understanding amongst HV stakeholders.
- There was substantial growth in effectiveness of communication among HV program leadership, and between leadership and home visitors.
- Respondents increasingly felt that there were sufficient networking opportunities between HV providers and programs.
- The HV collaborative provides ongoing networking opportunities.

Table 2. Communication & Collaboration Domain (% SA/A¹)

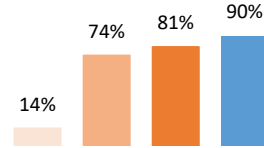
	'16	'17	'18	'19
There is effective communication between HV program leadership (e.g., HV supervisors, HV managers) within the county involved in the collaborative.	29%	79%	88%	89%
There is effective communication between HV leaders (e.g., HV supervisors, HV managers) and home visitors within the county involved in the collaborative.	17%	79%	75%	82%

¹ “% SA/A” is the percent of respondents who reported they Agreed or Strongly Agreed with the item.

Table 2. Communication & Collaboration Domain (% SA/A¹)

'16 '17 '18 '19

The current HV system provides sufficient networking opportunities between HV providers and programs.



There is a high level of mutual respect and understanding among people and programs involved in the HV systems-building work.

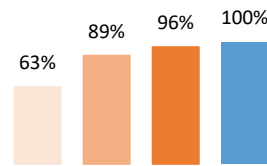
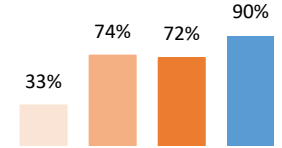


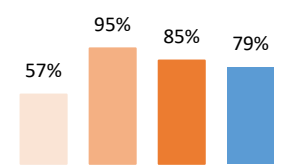
Table 3. Governance & Planning Domain (% SA/A)

'16 '17 '18 '19

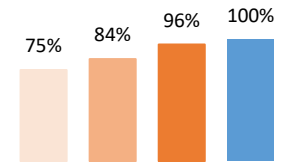
HV program leaders have the knowledge about each other's programs that is needed to collaborate successfully.



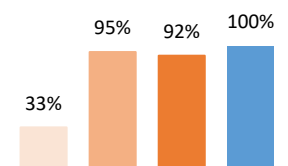
The group that is working on HV systems-building has a clear action plan that guides the steps for improving the HV system.



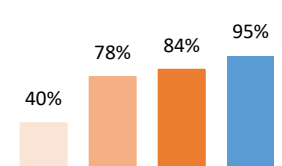
The HV collaborative has a shared, common vision.



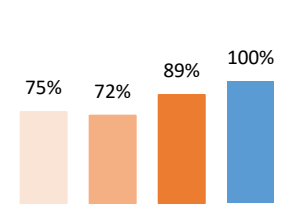
The HV collaborative has identified early- to mid-term objectives that will set the stage for attainment of longer-term goals.



People and organizations that are critical to the success of the HV collaborative are actively engaged.



Members of the HV collaborative have a clear understanding of how system building supports better outcomes for children and families.



Governance & Planning

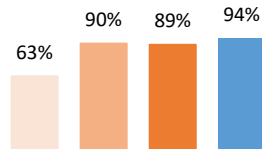
Strengths

- Respondents agreed that HV program leaders work together effectively and that the HV collaborative group has strengthened its shared, common vision.
- The HV collaborative group has established a clear action plan and identified early- to mid-term objectives to achieve longer-term goals.
- The HV collaborative group has actively engaged essential stakeholders as partners.
- Members of the HV collaborative report understanding how the HVSC project can support improved outcomes for children and families.

Table 3. Governance & Planning Domain (% SA/A)

'16 '17 '18 '19

HV program leaders are effective at working together to improve the overall HV system.

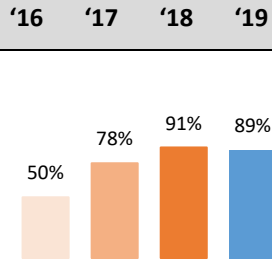


Roles & Responsibilities

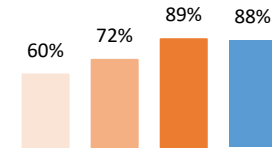
Respondents in Year 3 largely agree that the collaborative has sustained progress bringing clarity to participant's roles and responsibilities as well as building individual knowledge of local needs and resources.

Table 4. Roles & Responsibilities Domain (% SA/A)

All those involved in the HV systems work have a clear sense of their roles and responsibilities.



The HV collaborative group has ample knowledge of local needs and resources.



Equity

Strengths

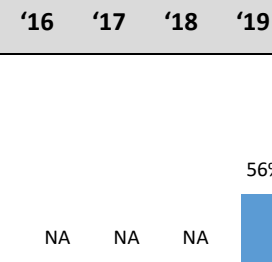
- Respondents continue to feel HV programs had effective ways to prioritize services to families.
- Many believe that the HV program staff reflect the diversity of families in the region.

Opportunities

Respondents at Year 3 feel less confident in their ability to meet the needs of culturally and linguistically diverse families

Table 5. Equity Domain (% SA/A)

The HV system currently meets the needs of all families in our region who are interested in services, through HV or connecting to the other family support programs.*



HV programs have effective ways to prioritize services to families.

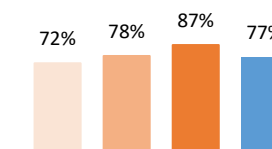
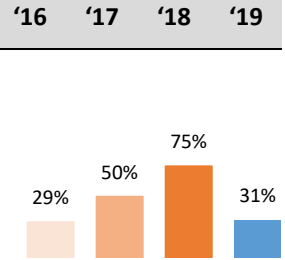
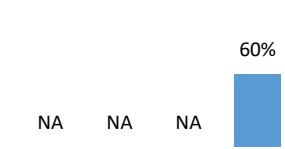


Table 5. Equity Domain (% SA/A)

HV programs currently have the capacity to meet the needs of culturally and linguistically diverse families in our community.



HV program staff currently reflect the diversity of families in the region.*



*"NA" indicates that the survey item was not included in prior years, so we report Not Applicable for those time points.

Continuous Program Improvement & Data Use

Strengths

- The HV collaborative group has benefited from learning from other similar initiatives to share information about effective practices.
- HV collaborative groups have been much more reflective on learnings and effectiveness of their collaborative group structures and processes.
- The HV collaborative group has collected and assessed data about needs and resources for children and families.

Table 6. Continuous Program Improvement & Data Use Domain (% SA/A)

The HV collaborative has sought out information from similar initiatives in other communities and continues to gather and share information about effective practices.

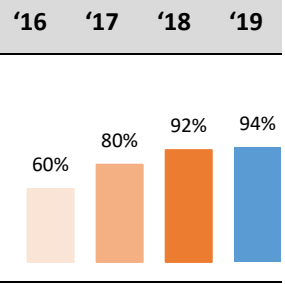
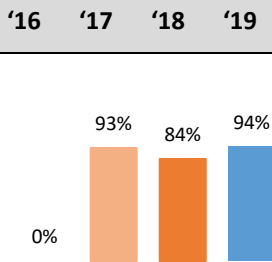
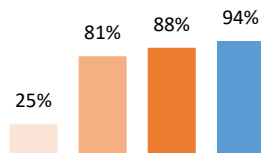


Table 6. Continuous Program Improvement & Data Use Domain (% SA/A)

The HV collaborative takes time periodically to reflect on what we are learning, including the effectiveness of our collaborative structures and processes.



The HV collaborative has collected and assessed data about the needs and resources for children and families in our region.



Systems Outcomes

Strengths

The HV collaborative group continues strengthening the sharing of professional development training resources.

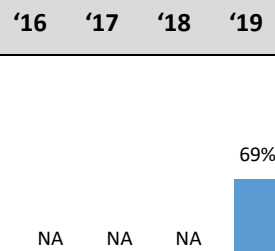
Opportunities

- The HV collaborative group could continue to develop a range of strategies to help families learn about the HV services available, understand the benefits of HV, and build trust with families to feel comfortable accessing HV services.
- The HV collaborative group could benefit from the development of effective referral agreements and improved MOUs.
- Finalizing and piloting a new shared referral form could help strengthen the HV referral system.

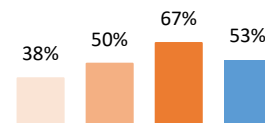
Community Awareness

Table 7. Systems Outcomes, Community Awareness Domain (% SA/A)

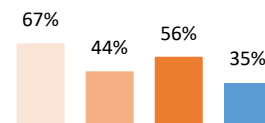
Staff in other agencies know about HV programs and services.*



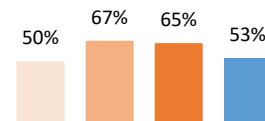
Families in our community know about HV programs and services.



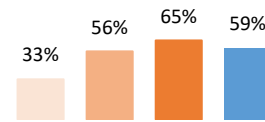
Families in our community understand the benefits of home visiting.



Families in our community are skeptical about the idea of HV services. **Lower is better**



Our community has effective ways of "getting the word out" to families about home visiting services.



*"NA" indicates that the survey item was not included in prior years, so we report Not Applicable for those time points.

Referral Process

Table 8. Systems Outcomes, Referral Process Domain (% SA/A)

Our community uses a shared/common referral form to facilitate family access to HV services.

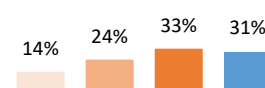
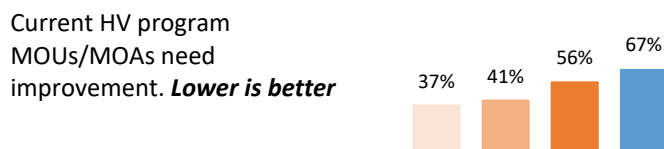
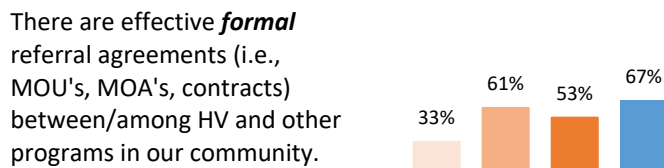
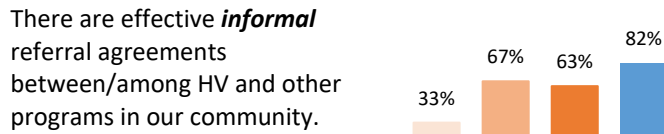
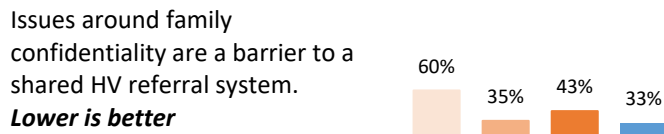
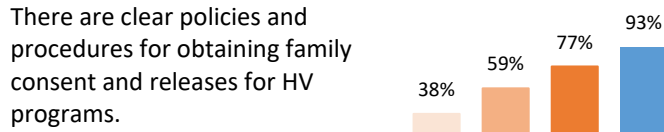


Table 8. Systems Outcomes, Referral Process Domain (% SA/A)

	'16	'17	'18	'19
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Professional Development

Table 9. Systems Outcomes, Professional Development Domain (% SA/A)

	'16	'17	'18	'19
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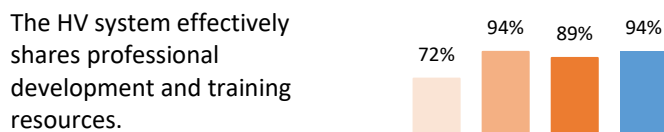
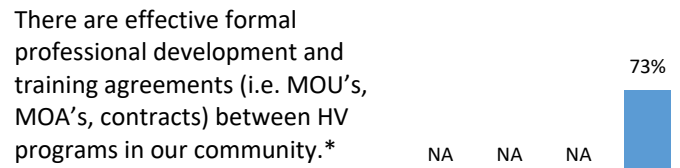
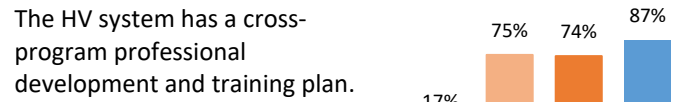


Table 9. Systems Outcomes, Professional Development Domain (% SA/A)

	'16	'17	'18	'19
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*"NA" indicates that the survey item was not included in prior years, so we report Not Applicable for those time points.

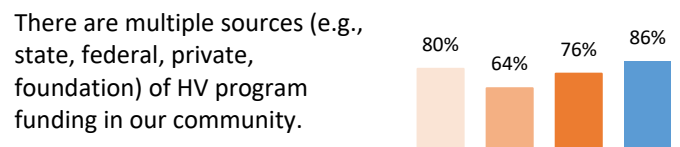
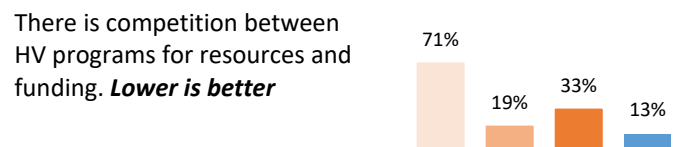
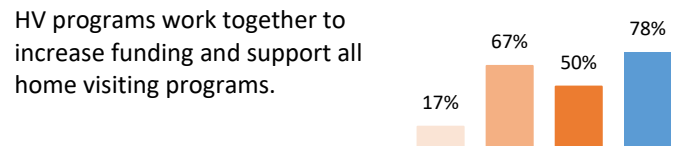
Sustainability

Strengths

Collaboration among HV programs to increase funding and support has increased over baseline.

Table 10. Sustainability Domain (% SA/A)

	'16	'17	'18	'19
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Reflections on Year 3 of the Project

Finally, survey respondents were invited to share their thoughts on key accomplishments of Year 3 of the HVSC project, as well as what they thought was most important to accomplish in the coming year. This feedback is summarized below.

Key Accomplishments

- Increased and stronger relationships among staff and between programs.
- Improved understanding of one another's HV programs.
- Professional development opportunities.
- Maintaining structures for communication and coordination, such as decision-making or advisory groups.

"I have a better understanding of the goals, players, structures, and language of home visiting."

"I really value the connections to community resources to allow the sharing of knowledge and resources."

Hopes for Coming Year

- Piloting a shared referral form and process.
- Improve outreach and communication with families to raise awareness of supports and find supports that are the best match for families.

"Bringing knowledge and education to families who do not know about or receive services."

"Coordinate referral system for all parenting services."

Appendix A: Survey Participants, Year 3

What best describes your organization? *(respondents could select all that apply)*

53%	10	Early learning (Head Start, preschool, child care, EI/ECSE)
32%	6	Home visiting program
16%	3	Health care, including health, hospitals, CCOs
21%	4	County, Hub or regional organization
21%	4	Parenting education
11%	2	Human services (self-sufficiency, child welfare)

What best describes your role? *(respondents could select all that apply)*

42%	8	Direct service provider or home visitor, including outreach & case management
16%	3	Program manger
21%	4	Program director
5%	1	Supervisor
16%	3	Other: Coordinator, program assistant

Which previous HVSC project convenings have you participated in?

32%	6	September 2019 Leadership Gathering in Roseburg
21%	4	November-December 2018 Regional PD Gatherings
37%	7	August 2018 Leadership Gathering in Roseburg
16%	3	July 2017 Annual Gathering in Roseburg
16%	3	September 2016 Annual Gathering in Roseburg
11%	2	June 2016 Kick-Off Gathering in Roseburg
58%	11	None of the above

Do you currently participate on a HVSC project leadership group, steering committee, or advisory group for your county or region?

47%	9	Yes
42%	8	No
11%	2	Not sure

Appendix B: % Don't Know for Items by Year

Reponses of “Don't Know” are omitted from the percent calculation of Agree/Strongly Agree. The percent of respondents who report they “Don't Know” are included for each item by year.

Domain	2016 (Baseline) N=10	2017 (Y1) N=21	2018 (Y2) N=29	2019 (Y3) N=19
There is effective communication between HV program leadership (e.g., HV supervisors, HV managers) within the county involved in the collaborative.	20%	0	10%	5%
There is effective communication between HV program leadership (e.g., HV supervisors, HV managers) within the region involved in the collaborative.	NA	NA	NA	11%
There is effective communication between HV leaders (e.g., HV supervisors, HV managers) and home visitors within the county involved in the collaborative.	30%	0	17%	11%
There is effective communication between HV leaders (e.g., HV supervisors, HV managers) and home visitors within the region involved in the collaborative.	NA	NA	NA	11%
The current HV system provides sufficient networking opportunities between HV providers and programs.	20%	0	7%	0
There is a high level of mutual respect and understanding among people and programs involved in the HV systems-building work.	10%	0	0	0
HV program leaders are effective at working together to improve the overall HV system.	10%	0	3%	5%
HV program leaders have the knowledge about each other's programs that is needed to collaborate successfully.	0	0	7%	0
The group that is working on HV systems-building has a clear action plan that guides the steps for improving the HV system.	20%	5%	3%	0
The HV collaborative has a shared, common vision.	10%	5%	3%	0
The HV collaborative has identified early- to mid-term objectives that will set the stage for attainment of longer-term goals.	30%	5%	7%	0
People and organizations that are critical to the success of the HV collaborative are actively engaged.	40%	0	10%	0
Members of the HV collaborative have a clear understanding of how system building supports better outcomes for children and families.	10%	0	0	0
All those involved in the HV systems work have a clear sense of their roles and responsibilities.	20%	5%	17%	0
The HV collaborative group has ample knowledge of local needs and resources.	40%	5%	0	5%
New Item for 2019: The HV system currently meets the needs of all families in our region who are interested in services, through HV or connecting to the other family support programs.	NA	NA	NA	0
HV programs have effective ways to prioritize services to families.	20%	0	0	0
HV programs currently have the capacity to meet the needs of culturally and linguistically diverse families in our community.	20%	0	0	0
New Item for 2019: HV program staff currently reflect the diversity of families in the region.	NA	NA	NA	0
The HV collaborative has sought out information from similar initiatives in other communities and continues to gather and share information about effective practices.	20%	0	0	0

Domain	2016 (Baseline) N=10	2017 (Y1) N=21	2018 (Y2) N=29	2019 (Y3) N=19
The HV collaborative takes time periodically to reflect on what we are learning, including the effectiveness of our collaborative structures and processes.	60%	0	0	0
The HV collaborative has collected and assessed data about the needs and resources for children and families in our region.	50%	0	0	0
Families in our community know about HV programs and services.	10%	0	7%	5%
Families in our community understand the benefits of home visiting.	0	0	3%	5%
Families in our community are skeptical about the idea of HV services.	10%	0	10%	5%
Our community has effective ways of "getting the word out" to families about home visiting services.	0	0	7%	5%
New Item for 2019: Staff in other agencies know about HV programs and services.	NA	NA	NA	11%
Our community uses a shared/common referral form to facilitate family access to HV services.	20%	5%	10%	11%
There are clear policies and procedures for obtaining family consent and releases for HV programs.	10%	5%	17%	21%
Issues around family confidentiality are a barrier to a shared HV referral system.	40%	5%	17%	16%
There are effective <i>informal</i> referral agreements between/among HV and other programs in our community.	30%	5%	14%	5%
There are effective <i>formal</i> referral agreements (i.e., MOU's, MOA's, contracts) between/among HV and other programs in our community.	20%	5%	35%	16%
Current HV program MOUs/MOAs need improvement.	20%	10%	35%	16%
The HV system effectively shares professional development and training resources.	20%	0	0	0
The HV system has a cross-program professional development and training plan.	30%	0	0	0
New Item for 2019: There are effective formal professional development and training agreements (i.e. MOU's, MOA's, contracts) between HV programs in our community	NA	NA	NA	0
HV programs work together to increase funding and support all home visiting programs.	30%	14%	14%	0
There is competition between HV programs for resources and funding.	20%	10%	28%	11%
There are multiple sources (e.g., state, federal, private, foundation) of HV program funding in our community.	30%	19%	17%	21%