Appendix A: Wisconsin's Family Foundations Home Visiting Strategic Plan

Mission Statement

Promote parent, infant and early childhood health and well-being, in partnership with families facing adversity, through home-based support, information, and connection to community.

Our Vision

All Wisconsin families have a strong beginning to be healthy, connected, and successful.

Our Values

Trust	Partnerships are key to ensuring a high quality and comprehensive early childhood system.
Respect	Relationships are built through respectful and collaborative partnerships.
Engagement	Family voices are included and welcomed in policy and program development.
Accountability	Data informs our strategies and decision-making process. Continuous improvement is critical to providing quality services.
Trauma-informed practices	Traumatic life experiences affect health and well-being.
Culturally responsible	An equity lens and cultural responsiveness are key to meeting the unique needs of individuals.
Workforce support	High quality home visiting programs have a strong, competent workforce.
Family-centered	Parents are the experts on their families and want the best for them. Early relationships are foundational to children's health and wellbeing.

Our Domains, Goals, and Strategies

Domains	Goals	Strategies
Family-Centered	- By December 2025, FFHV will integrate a family voice system, based on trust and respect, at the state and local levels so that family voice will be regularly included in program planning.	- Embed cultural humility, racial equity and trauma-informed practices in all key decisions related to the FFHV program. - Research and identify best practices for integrating family voice.
Growth & Sustainability	- By 2025, the FFHV program will increase the number of families served by 50%.	- Build awareness of FFHV and cultivate strong partnerships with service delivery agencies; federal, state, and local leadership; legislature; and other related organizations. - Evaluate sustainability of the FFHV program. - Periodically evaluate and balance the growing needs of the FFHV program with resources that can be dedicated to the program. - Continue to invest in FFHV services and infrastructure, serving at least the current number of counties, tribes, and families as of 2018
Quality Workforce	- By 2025, increase retention of home visiting staff with three or more years' tenure by 5%.	- Attract qualified applicants for HV positions at state and local levels. - Continue to enhance high quality professional development, coaching, and technical assistance opportunities for HV agencies and workforce in the state.
Learning & Improvement	- By 2021, we will have developed new guiding questions to inform learning at the State administrative and LIA service levels. - By 2025, FFHV program will improve its performance according to State and MIECHV requirements and MIECHV performance measure plan criteria (HRSA will share improvement criteria in 2019).	- Use Learning Agenda concept and approach to identify key questions and areas for improvement. - Create and sustain a culture of evidence-based decision making and performance improvement through program evaluation, CQI, or other data-driven methods.

Appendix B: Provider Survey Questions

In order to better serve pregnant women and families with young children, the Wisconsin Department of Children and Families (DCF) is conducting an assessment of home visiting programs in key counties in Wisconsin.

As part of this process, DCF is working with the Center for Community and Nonprofit Studies at the University of Wisconsin-Madison to understand:

- The quality and capacity of home visiting programs
- Facilitators and barriers to family participation
- Community readiness for home visiting programs

While your participation is voluntary, your input on these questions is vital in helping us get a complete picture of the home visiting programs in your region. The questionnaire will take you about 15 minutes to complete and you may stop and return to the questionnaire as you like. We will be collecting responses until June 30th.

If you have any questions about this survey you may contact Alex Wells, UW-Madison Center for Community and Nonprofit Studies (awells3@wisc.edu) or Abigail Eskenazi, the Wisconsin Department of Children and Families (abigail.eskenazi@wisconsin.gov).

For this survey, we are defining home visiting programs as:

Home visiting programs: Early childhood programs that use home visiting as a primary intervention strategy for providing services to pregnant women and/or children from birth to kindergarten entry. This definition excludes programs where home visits are infrequent or where home visiting is supplemental to other services.

For this survey, we are defining home visiting programs as:

Early childhood programs that use home visiting as a primary intervention strategy for providing services to pregnant women and/or children from birth to kindergarten entry. This definition excludes programs where home visits are infrequent or where home visiting is supplemental to other services.

Q1: Does your program fit this definition?

Yes

No

Please tell us about your role related to home visiting programs in your community. In this survey, the word "community" may mean a county, multi-county region, or tribe.

Q2: Do you work directly with a home visiting program as an administrator, home visitor, or other staff person?

      1) I work with one home visiting program

      2) I work with multiple home visiting programs

      3) No

Q3: How many home visiting programs do you work with?

      1) 2

      2) 3

      3) More than 3

Q4: Please give a name for your (first) program so that it can be used in the following questions.

Q5: What agency or organization delivers this program?

Q6: What is your role in [name of program]?

      1) Program manager

      2) Supervisor

      3) Home visitor

      4) Outreach specialist

      5) Support staff

      6) Other

Q7: Which Wisconsin Counties and/or tribes does [program name] serve? Please check all that apply.

1. Adams
2. Ashland
3. Bad River Band of Lake Superior Chippewa
4. Barron
5. Bayfield
6. Brothertown Indian Nation
7. Brown
8. Buffalo
9. Burnett
10. Calumet
11. Chippewa
12. Clark
13. Columbia
14. Crawford

15. Dane
16. Dodge
17. Door
18. Douglas
19. Dunn
20. Eau Claire
21. Florence
22. Fond du Lac
23. Forest
24. Forest County Potawatomi
25. Grant
26. Green
27. Green Lake
28. Ho-Chunk Nation
29. Iowa
30. Iron
31. Jackson
32. Jefferson
33. Juneau
34. Kenosha
35. Kewaunee
36. La Crosse
37. Lac Courte Oreilles Band of Lake Superior Chippewa
38. Lac du Flambeau Band of Lake Superior Chippewa
39. Lafayette
40. Langlade
41. Lincoln
42. Manitowoc
43. Marathon
44. Marinette
45. Marquette
46. Menominee
47. Menominee Indian Tribe of Wisconsin
48. Milwaukee
49. Mole Lake (Sokaogon Chippewa Community) Band of Lake Superior Chippewa
50. Monroe
51. Oconto
52. Oneida
53. Outagamie
54. Ozaukee
55. Pepin
56. Pierce
57. Polk

58. Portage
59. Price
60. Racine
61. Red Cliff Band of Lake Superior Chippewa
62. Richland
63. Rock
64. Rusk
65. Saint Croix Chippewa Indians of Wisconsin
66. Sauk
67. Sawyer
68. Shawano
69. Sheboygan
70. St. Croix
71. Stockbridge-Munsee Community Band of Mohican Indians
72. Taylor
73. Trempealeau
74. Vernon
75. Vilas
76. Walworth
77. Washburn
78. Washington
79. Waukesha
80. Waupaca
81. Waushara
82. Winnebago
83. Wood

Q8: Is there a geographical region you work in that is not listed here? If yes, please add below.

Q9: What home visiting model(s) does [program name] use? Check all that apply.

      1) Early Head Start Home Based option

      2) Family Spirit

      3) Healthy Families America

      4) Home Instruction for Parents of Preschool Youngsters (HIPPY)

      5) Nurse Family Partnership

      6) Parents as Teachers Model

      7) Other

Q10: How is [program name] typically funded? Please check all that apply.

      1) Federal funds (e.g. MIECHV)

      2) State funds

      3) United Way

      4) Local government funds (e.g. city or county)

      5) Private foundations

      6) Tribal governments

      7) Other

Q11: How many families did [program name] serve in the most recent program year (i.e. calendar year or fiscal year, depending on your program's definition)? Please give an estimate of the number of families in each of the counties or tribes that you chose.

      [list of counties]

Q12: Could [program name] have served more families last year? If yes, please check the counties that you could have served more families in.

      [list of counties]

Q13: What are some barriers that may have prevented your program from serving more families? Please check all that apply.

      1) Meeting language needs of families

      2) Meeting cultural needs of families

      3) Stigma around home visiting programs

      4) Lack of public knowledge about home visiting

      5) Not enough slots to serve all families in need

6) Traveling long distances to meet with families

7) Program funding

8) Staff training

9) Staff retention

10) Gaps in staffing

11) Other

Q14: How would you describe staff retention in your program?
Retaining staff in my program is:

1) Not difficult at all

2) A little difficult

3) Somewhat difficult

4) Very difficult

5) Not sure

Q15: If your program has experienced problems with staff retention, why do you think that is?

1) Lack of co-worker support

2) Lack of qualified applicants

3) Lack of opportunities for professional advancement

4) Lack of pay

5) Staff burnout

6) Lack of supervisory support

7) Travel

8) Vicarious trauma

9) Other

Q16: Has your program experienced gaps in staffing within the last 2 program years?

1) Yes

2) No

3) Not sure

Q17: Do you have a dedicated staff person focused on performance monitoring, administrative support, or data reporting?

1) Yes

2) No

3) Not sure

Q18: Are there currently unfilled home visitor positions/gaps in your program?

1) Yes

2) No

Q19: How many years of experience do you have as a home visitor?

1) Less than 3 years

2) 3 or more years

3) I have no direct experience as a home visitor (e.g. administrator)

Q20: Please list the number of home visitors on your staff that have experience of:

1) 0-3 years

2) 3 or more years

Q21: Does your program have a waitlist?

1) Yes

2) No

3) Program or model does not allow waitlist

Q22: If you are not allowed to have a waitlist, have you had to refer families to other programs?

1) Yes

2) No

Q23: How long do families typically have to wait?

1) A month or less

2) Less than 6 months

3) 6-12 months

4) A year or more

5) Not applicable

Q24: Please describe your program's target population. Check all that apply.

1) All families that are pregnant and/or have young children

2) Children with developmental delays or disabilities

3) Families that have been involved with child welfare services

4) Families with a history of low student achievement

5) Families with a history of substance use

6) Low-income families

7) Military families

8) Pregnant adolescents

9) Pregnant mothers

10) Other

Q25: Are there specific language needs for families in your community who might benefit from home visiting programs?

1) Yes

2) No

Q26: Do you feel your program is able to meet these language needs?

1) Yes

2) No

Q27: Are there families in your community with other particular needs that your program may have difficulty meeting?

1) Yes

2) No

Q28: What are those needs?

Q29: Do you feel your program is more accessible to some people in your community than others?

1) Yes

2) No

Q30: If so, why do you feel your program is more accessible to some people in your community than others?

[If the respondent indicated participating in more than one program in question 3. Then they would then respond to questions 4 through 30 with the prompt:]

The following questions are about your second program.

[This process is repeated for up to 3 programs:]

The next questions ask about barriers that home visiting programs might face in your community. In this survey, the word "community" may mean a county, multi-county region, or tribe.

Q31: What barriers do you feel home visiting programs face in your community in providing services or addressing service gaps? Please check all that apply.

1) Gaps in staffing

2) Lack of public knowledge about home visiting

3) Meeting cultural needs of families

4) Meeting language needs of families

5) Not enough slots to serve all families in need

6) Program funding

7) Staff retention

8) Stigma around home visiting programs

9) Staff training

10) Traveling long distances to meet with families

11) Other

Q32: Of the barriers for programs that you chose, please drag and rank the top 3 in terms of importance.

- Gaps in staffing
- Lack of public knowledge about home visiting
- Meeting cultural needs of families
- Meeting language needs of families
- Not enough slots to serve all families in need
- Program funding
- Staff retention
- Stigma around home visiting programs
- Staff training
- Traveling long distances to meet with families
- Other

Q33: What types of disparities exist in the community/communities you serve?

Q34: How if at all, does your program work to address the types of disparities you mentioned in the previous question?

Q35: How if at all, do your programs work to address the types of disparities you mentioned in the previous question?

The following questions are about community readiness to support or expand home visiting programs. In this survey, the word "community" may mean a county, multi-county region, or tribe.

Q36: Are you aware of any plans to start or expand home visiting? If yes, please check the counties or tribes where this is happening.

[list of counties]

Q37: Can you briefly describe these plans?

Q38: Are there particular challenges a home visiting program may encounter when starting or expanding services in the community?

Q39: What opportunities are available in this community for home visiting programs to assess indicators of need? Are there evaluations, research programs, or continuous quality improvement efforts?

Q40: Does your program or organization partner with or exchange referrals with other community resource agencies or programs such as:

1) Assistance in accessing government benefits

2) B-3 early intervention program

3) Childcare resource & referral agencies or childcare providers

4) Head Start or Early Head Start center based

5) Housing Assistance

6) Job Training Programs

7) Local Child Protective Services

8) Local criminal justice

9) Local health care providers (OBGYNs, primary care providers, birthing hospital, developmental therapy)

10) Local School District

11) Mental Health Services

12) Prenatal Care Coordination

13) Substance Use Treatment and Counseling Services

14) Women, Infants, and Children Nutrition Program (WIC)

15) Other

Q41: Is there an active early childhood collaborative, or community coalition in your community?

1) Yes

2) No

Q42: Does your program or agency participate in these efforts?

1) Yes

2) No

Q43: I identify as:

1) Female

2) Male

3) Nonbinary

4) Prefer not to answer

5) Self-describe:

Q44: My age is:

1) 18-30 years old

2) 31-45 years old

3) 46-60 years old

4) 61 + years old

5) Prefer not to answer

Q45: I identify my ethnicity as:

1) Asian

2) Black/African

3) Caucasian

4) Hispanic/Latinx

5) Native American/Alaska Native

6) Pacific Islander

7) Prefer not to answer

8) Self-describe:

Q46: Our needs assessment would like to hear more about the programs you work with. We also want to be respectful of your time. Would you be willing to have a phone call about your programs? If so, please leave your contact information so that we may reach you.

Email

Phone Number

First name

Last name

Q47: Would you be willing to have further phone or email conversation around these topics to assist DCF in understanding your program or region? If so, please give your name and email.

Appendix C: Family Voice Survey Questions

Hello,
The Wisconsin Department of Children and Families would like to know about the experiences of families who participate in home visiting programs. We will use this information to help understand the quality and capacity of home visiting programs and the needs for families in Wisconsin.

The survey has 5 questions and will take less than 5 minutes to complete. Your participation is voluntary, and your answers are very important to us!

Your responses are anonymous and will not be shared with your home visitor or their program.

Q1: What county do you live in? Scroll down to see all of the options.

1. Adams
2. Ashland
3. Barron
4. Bayfield
5. Brown
6. Buffalo
7. Burnett
8. Calumet
9. Chippewa
10. Clark
11. Columbia
12. Crawford
13. Dane
14. Dodge
15. Door
16. Douglas
17. Dunn
18. Eau Claire
19. Florence
20. Fond du Lac
21. Forest
22. Grant
23. Green
24. Green Lake
25. Iowa
26. Iron
27. Jackson
28. Jefferson

29. Juneau
30. Kenosha
31. Kewaunee
32. La Crosse
33. Lafayette
34. Langlade
35. Lincoln
36. Manitowoc
37. Marathon
38. Marinette
39. Marquette
40. Menominee
41. Milwaukee
42. Monroe
43. Oconto
44. Oneida
45. Outagamie
46. Ozaukee
47. Pepin
48. Pierce
49. Polk
50. Portage
51. Price
52. Racine
53. Richland
54. Rock
55. Rusk
56. Sauk
57. Sawyer
58. Shawano
59. Sheboygan
60. St. Croix
61. Taylor
62. Trempealeau
63. Vernon
64. Vilas
65. Walworth
66. Washburn
67. Washington
68. Waukesha
69. Waupaca
70. Waushara
71. Winnebago

72. Wood

Q2: What is your tribal affiliation (if applicable)?

1. Bad River Band of Lake Superior Chippewa
2. Brothertown Indian Nation
3. Forest County Potawatomi
4. Ho-Chunk Nation
5. Lac Courte Oreilles Band of Lake Superior Chippewa
6. Lac du Flambeau Band of Lake Superior Chippewa
7. Menominee Indian Tribe of Wisconsin
8. Mole Lake (Sokaogon Chippewa Community) Band of Lake Superior Chippewa
9. Oneida Nation
10. Red Cliff Band of Lake Superior Chippewa
11. Saint Croix Chippewa Indians of Wisconsin
12. Stockbridge-Munsee Community Band of Mohican Indians
13. Not applicable

Q3: My home visitor helps me reach my goals.

1) Strongly agree

2) Agree

3) Neutral

4) Disagree

5) Strongly Disagree

Q4: What goals has your home visitor helped you accomplish?

Q5: Some families who might benefit from home visits have not joined the home visiting program. Why do you think that is? (Please check all that apply.)

1) Language barriers

2) No one told them about the home visiting program.

3) Their family doesn't want them to join the home visiting program.

4) Housing issues

5) Mental health issues

6) Transportation difficulties

7) Other (please type)

Appendix D: Wisconsin Home Visiting Needs Assessment Stakeholder Group

The Wisconsin Family Foundations Home Visiting Team would like to thank the following stakeholders for their thoughtful feedback on this project:

- Amy Hilgendorf, UW-Madison Center for Community and Nonprofit Studies
- Alex Wells, UW-Madison Center for Community and Nonprofit Studies
- Grace Armstrong, UW-Madison Center for Community and Nonprofit Studies
- Laura Evans, UW-Madison Center for Community and Nonprofit Studies
- Liz Skora, UW-Madison Center for Community and Nonprofit Studies
- Kristin Burki, Department of Children and Families, Prevention Scan Lead
- Jillian Clemens, Department of Children and Families, Prevention Scan Lead
- Tania Cornelius, Department of Children and Families, Tribal Affairs Specialist
- Stephanie Lozano, Department of Children and Families, Tribal Liaison
- Amanda Reeve, Department of Children and Families, Preschool Development Grant Partner
- Kaitlin Tolliver, Department of Children and Families, Trauma and Domestic Abuse Program Coordinator
- Katrina Alber, Department of Health Services, Title V Partner
- Angie Rohan, Department of Health Services, Title V and State Health Assessment Partner
- Stephanie West, Department of Health Services, Title V Partner
- Jennie Mauer, Wisconsin Head Start Association, Head Start Partner
- Rebecca Murray, Child abuse and Neglect Prevention Board, Title II CAPTA Partner
- Josh Mersky, UW-Milwaukee, MIECHV Evaluation Team
- Colleen Janczewski, UW-Milwaukee, MIECHV Evaluation Team
- Suzette Rembert, Great Lakes Inter-Tribal Council
- German Gonzalez, Great Lakes Inter-Tribal Epidemiology Center
- Connie Dunlap, Supporting Families Together Association
- Staci Sontoski, Milwaukee Child Welfare Partnership
- Wendy Schwalbe, Milwaukee Child Welfare Partnership
- Kate Rifken, Department of Health Services, Substance Abuse Evaluation Specialist
- Jennifer Ortner, Department of Health Services, WIC
- Kristin Kopcha, Children's Wisconsin, MIECHV LIA
- Kara Singleton, Children's Wisconsin, MIECHV LIA
- Melissa Brockie, Next Door, MIECHV LIA
- Daniel Stattelman-Scanlan, Public Health Madison Dane County, MIECHV LIA

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Wisconsin Department of Children and Families

Appendix F: Childhood Opportunity Index Indicators

Table 2. COI 2.0 indicators and domains

	INDICATOR	DESCRIPTION (SOURCE)
EDUCATION	**Early childhood education (ECE)**	
	ECE centers	Number of ECE centers within a 5-mile radius (own data collection from state and federal sources)
	High-quality ECE centers	Number of NAEYC accredited centers within a 5-mile radius (own data collection from state and federal sources)
	ECE enrollment	Percent 3- and 4-year-olds enrolled in nursery school, preschool or kindergarten (ACS)
	Elementary education	
	Third grade reading proficiency	Percent third graders scoring proficient on standardized reading tests, converted to NAEP scale score points (EDFacts, GS and SEDA)
	Third grade math proficiency	Percent third graders scoring proficient on standardized math tests, converted to NAEP scale score points (EDFacts, GS and SEDA)
	Secondary and postsecondary education	
	High school graduation rate	Percent ninth graders graduating from high school on time (EDFacts and GS)
	Advanced Placement (AP) course enrollment	Ratio of students enrolled in at least one AP course to the number of 11th and 12th graders (CRDC)
	College enrollment in nearby institutions	Percent 18-24 year-olds enrolled in college within 25-mile radius (ACS)
	Educational and social resources	
	School poverty	Percent students in elementary schools eligible for free or reduced-price lunches, reversed (NCES CCD)
	Teacher experience	Percent teachers in their first and second year, reversed (CRDC)
	Adult educational attainment	Percent adults ages 25 and over with a college degree or higher (ACS)
HEALTH & ENVIRONMENT	**Healthy environments**	
	Access to healthy food	Percent households without a car located further than a half-mile from the nearest supermarket, reversed (USDA)
	Access to green space	Percent impenetrable surface areas such as rooftops, roads or parking lots, reversed (CDC)
	Walkability	EPA Walkability Index (EPA)
	Housing vacancy rate	Percent housing units that are vacant, reversed (ACS)
	Toxic exposures	
	Hazardous waste dump sites	Average number of Superfund sites within a 2-mile radius, reversed (EPA)
	Industrial pollutants in air, water or soil	Index of toxic chemicals released by industrial facilities, reversed (EPA)
	Airborne microparticles	Mean estimated microparticle (PM2.5) concentration, reversed (CDC)
	Ozone concentration	Mean estimated 8-hour average ozone concentration, reversed (EPA)
	Extreme heat exposure	Summer days with maximum temperature above 90F, reversed (CDC)
	Health resources	
	Health insurance coverage	Percent individuals ages 0-64 with health insurance coverage (ACS)
SOCIAL & ECONOMIC	**Economic opportunities**	
	Employment rate	Percent adults ages 25-54 who are employed (ACS)
	Commute duration	Percent workers commuting more than one hour one way, reversed (ACS)
	Economic and social resources	
	Poverty rate[a]	Percent individuals living in households with incomes below 100% of the federal poverty threshold, reversed (ACS)
	Public assistance rate[a]	Percent households receiving cash public assistance or Food Stamps/Supplemental Nutrition Assistance Program, reversed (ACS)
	Homeownership rate[a]	Percent owner-occupied housing units (ACS)
	High-skill employment[a]	Percent individuals ages 16 and over employed in management, business, financial, computer, engineering, science, education, legal, community service, health care practitioner, health technology, arts and media occupations (ACS)
	Median household income[a]	Median income of all households (ACS)
	Single-headed households	Percent family households that are single-parent headed, reversed (ACS)

Notes: We reverse some of the indicators when combining them into the index, e.g., the poverty rate, so that more of that indicator always means more opportunity. [a]These five indicators are combined into an economic resource index.

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