



**Essentials for Childhood
Evidence-Based Programs Workgroup
March 28, 2018 | 1:00-3:00 p.m.**

Attendees: Maggie Bailey, Chris Bryant, Catherine Joyner, Paul Lanier, Kim McCombs-Thornton, Kristin O'Connor (via phone), Phil Redmond, Michelle Ries, Susan Robinson, Meghan Shanahan, Marshall Tyson (via phone), Jan Williams (via phone)

Welcome & Introductions: Michelle Ries

Michelle opened the meeting by briefly reviewing the goals of the meeting and asking all participants to introduce themselves.

Home Visiting Landscape Study: Paul Lanier

Paul gave an overview of the home visiting landscape study he and his team are currently conducting. The survey has been developed and vetted and is being fielded beginning this week. The survey will be sent to program staff of the four evidence-based home visiting models being implemented in North Carolina, and the team will also solicit responses to the survey from any other home visiting programs in the state. They have also begun interviewing program staff, reviewing available literature and existing research, and analyzing similar work being done in other states. The goal is for the study and final report to be completed at some point in June. Results from the survey will be disseminated through their website, and they will be authoring policy briefs to highlight segments of the data.

The survey includes 45 questions related to three main topic areas: program administration (including collaboration with local organizations for referrals, centralized systems for intake), service delivery (curriculum, model fidelity, etc.) and service population (# of families down to ZIP code level). It took pilot sites between 1 and 2 hours to complete.

The team is working with NCPC and DHHS to plan a Home Visiting Consortium set for October 22nd and 23rd. This meeting will bring together 300-350 home visiting program staff from across the state as well about 60 stakeholders in leadership/planning/funding roles. Dr. Deb Daro is confirmed as the keynote speaker.

The planning committees are organizing two breakout tracks within the consortium. One track will be for the program staff and the other for the leaders/funders/policymakers in the room. The leadership track will include presentations about the finding from this landscape survey to level-set. Additional possible speakers include folks from Guilford County to talk about their home visiting work as part of the early childhood system, as well as someone from another state to talk about what they are doing.

Paul asked for feedback in the group around invitees and other suggestions on how to best use the time and structure the sessions. The group identified the upcoming Medicaid home visiting reimbursement pilots in Cleveland and Johnston Counties and the Pay for Success models being used in South Carolina as potential topics for discussion. The group also revisited the idea of

having a RFA/RFP alignment discussion as previously discussed in the summer—the planning committees have discussed using a data walk activity using data from the landscape survey as a conversation-starter with funders, encouraging them to think about what/how/where they are funding EBPs. The EBP workgroup will stay involved as the consortium agenda develops to identify opportunities for involvement in this session, as well as specific questions for the funder and desired outcomes from the session.

In regards to invitees, Paul welcomed feedback from the group about specific legislators to invite. Meeting participants also discussed reengaging United Way as funders, as well as members from the Funders Alliance.

Results First: Michelle Ries

Michelle provided a brief update from meetings with Darryl Childers in the Governor’s Office and Paris Penny from DHHS about North Carolina’s recently announced participation in the Pew-MacArthur Results First Initiative. This project provides assistance to states in using cost-benefit analysis to make sound investments in policies and programs. North Carolina will be using this model to inform investments in evidence-based birth-to-one programs, with a primary focus on improving birth outcomes, and chronic disease programs, specifically looking at obesity and diabetes.

The state is in the beginning phase, which involves putting together an inventory of all relevant programs that DHHS implements. The first report with the inventory is due to the legislature in April. E4C aims to stay informed about this work, as it may be particularly relevant to the EBP workgroup.

Recommendation for Standardized Five-Year Funding Cycle Discussion

Michelle revisited the draft recommendation for a five-year funding cycle for evidence-based programs and how to carry this forward. Catherine discussed the need to research the procurement policies within DHHS to understand the constraints and rationale behind the current 3-year maximum funding period and other funding-related policies. Catherine will reach out to others in DHHS—Kristin, Susan, and Chris—for any information they may have.

Kristin also shared that DSS is working with an agency called Third Sector for assistance with their contracting processes and offered to connect with Catherine to discuss that further.

Essentials for Childhood and Growing Up Well Reconvening Meeting Discussion

Michelle described the overarching goals of the meeting, including: providing updates on progress toward recommendations, hearing about community strategies from various panels, and facilitating small group discussions to get perspectives on how to keep moving the Essentials work forward.

Carol Emig is confirmed as the keynote speaker. She will talk about policy strategies in other states and strategies for communicating research and data to different types of stakeholders.

The group discussed opportunities to guide the conversations in both the small group discussions and the community panels. For the purposes of this group, it may be useful to include a question about funding challenges/opportunities for these discussions. Participants suggested an addition to the panelists on the community strategies panel—Scotland County School System was suggested, as they have employed licensed mental health professionals in all of their schools and can provide a rural perspective to balance the panel. Paul shared that there is a white paper on NIRN’s website about supporting implementation science in rural areas.

Next Steps and Scheduling:

Catherine will connect with Kristin about Third Sector’s work with DSS, and will also reach out to Kristin, Chris, and Susan about procurement policies within DHHS to inform the workgroup’s standardized funding cycle recommendation.

Paul will keep in touch about agenda development for the October home visiting consortium so that the group can provide any assistance with structuring the sessions.

Maggie will contact group members in the next couple of weeks to schedule the next workgroup meeting.