

Child Welfare Information Gateway Podcast
Prevention Training for Home Visitors TRANSCRIPT

Presenters: Female Narrator; Tom Oates, Child Welfare Information Gateway; Laurel Aparicio, Early Impact Virginia; Janet Horras, Iowa Department of Public Health State Home Visitation Director

[00:00:00]: [Music Introduction]

FEMALE NARRATOR [00:00:02]: This is the Child Welfare Information Gateway Podcast, a place for those who care about strengthening families and protecting children. You'll hear about the innovations, emerging trends and success stories across child welfare direct from those striving to make a difference. This is your place for new ideas and information to support your work to improve the lives of children, youth, and families.

TOM OATES [00:00:33]: And welcome once again to the Child Welfare Information Gateway podcast where we bring you conversations about new practices, unique perspectives, and insight to those working in or connected to child welfare to help improve the lives of children, youth, and families. I'm Tom Oates, glad you could join us once again. We are so grateful to have you join this growing community of listeners and supporters on the Information Gateway podcast – thanks to all of you who've subscribed and join us each and every month. We're available on Apple Podcasts, on GooglePlay, Stitcher, Spotify, and Sound Cloud – so if you haven't, I encourage you to be a part of this community and subscribe. And this is episode number 50, so we're really pleased to be able to continue these conversations and share them with you.

[00:01:20]: Now, we've spent a little bit of time talking about professional development here on the podcast, and today we're going to dive into a conversation about a series of e-learning courses designed for home visiting professionals, but with a strong alignment to child welfare and prevention. It's called the Institute for the Advancement of Family Support Professionals. Now, what makes this series of courses unique are two things - first, the courses are all part of a framework that supports multiple competencies and skills and this enables supervisors and trainers to create individualized learning plans for each of their staff members. And second, the development of the institute comes from a collaboration from public health agencies, home visiting organizations, and universities - and that may not be uncommon, but what is unique is it's a collaboration between those types of groups from three different states: Iowa, Virginia, and Kansas. Now the Institute – which is completely digital, it's a website with the courses and competencies – received some of its funding from the Maternal, Infant, and Early Childhood Home Visiting program grants and we talk a bit about that connection. We also share the connection that much of the trainings have with child welfare, especially regarding prevention and family strengthening efforts.

[00:02:38]: We chatted with two members of the Institute's team that came together after finding they shared a common goal, so rather than work separately to create duplicate training, they joined forces and combined resources. We're joined by Janet Horras, the State Home Visitation Director for the Iowa Department of Public Health, and Laurel Aparicio, the Director of Early Impact Virginia, a home visitation education and service provider. So, it's a lesson in collaboration that's resulted in more than 60 online courses, a competency framework with tools to support supervisors and trainers to make sure caseworkers are actually building skills and not just demonstrating they can pass tests, and it's on its way to providing certifications for home visitors and CEUs for those working in human services. And it's free. So, we're talking prevention training that can support child welfare caseworkers – the Institute for the Advancement of Family Support Professionals – here on the Child Welfare Information Gateway podcast.

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[00:03:38]: Laurel and Janet, thank you so much for spending time and joining us here on the Child Welfare Information Gateway Podcast.

LAUREL APARICIO [00:03:44]: Great to be here, thanks for having us.

TOM OATES [00:03:46]: So, Janet, I want to start with you to really approach this from the common need here and as we talk about the Institute for the Advancement of Family Support Professionals - especially for the audience here for the Information Gateway Podcast - give me a sense of your definition of family support professions.

JANET HORRAS [00:04:08]: Sure. The Institute was really designed for family support professionals, when you think of that it's people working on the prevention side, which is a little different than your typical audience that you have, however, there is so much overlap. So, if we looked at it, I would think that the competencies, the core competencies would be very similar between child welfare folks and folks that are working more on the prevention end of things. So, the similarities are they folks that work with families, they are deeply troubled families, families that have many, are facing many risk factors, and typically they, in our case, it's families that have just either are giving birth or just have given birth. So, families with new babies, which to any family is enough to create lots of ripples in the family structure.

TOM OATES [00:05:01]: So, that prevention lens that you talked about actually is now applying across child welfare and realizing it's not only prevention from an individual caseworker's perspective, but really that community-based prevention that is really starting to take hold. So, with family home visitors or, you know, family support professionals, we talk about home visiting in the training. So, what sparked the overall need that made at least you and the folks from Iowa to want to support training for home visitors?

JANET HORRAS [00:05:31]: Sure, MIECHV was signed into law in 2010 and so that meant a lot of money going out to states to create and expand evidence-based home visiting, that's what that was all about. But, at the same time there was not anything that was put into place to support the professional development of all these brand-new home visitors. So, there became this void in our field that needed to be filled and so we were looking at how do people get their training. These were busy folks, these are people that are working odd hours, that aren't necessarily the traditional work hours and that - also seeing the trends of, these are younger people that are used to getting, using technology to get training, to communicate in much different ways than someone my age, quite frankly, you know, I'm at the other end of my career. And so, knowing that the distance learning was gonna be really important to these people and that's what they were going to be used to and so, that's how we really looked at and said, we gotta do something. You know, the models can't be expected to prepare these folks, nobody goes to college and gets a degree in home visiting - that doesn't exist.

[00:06:42]: So, if you ask, I mean probably if we took time to share, how did we get to the place that we're at now in our careers, it would be very different starting points and very different pathways, right? So, that means when you enter the field, you're going to have great strengths, but it also means you're gonna have gaps. And so, how to address those gaps without making everyone sit through the same training and so I'm not wasting 50 minutes of every hour on training I already know and I only have about 10 minutes of it that's valuable. And so, the Career Compass also fits into that with the institute which I know is a question that we're gonna talk about a little bit later.

TOM OATES [00:07:17]: Yeah, the Career Compass and the Competency Framework is something that we really wanna dive into. You mentioned the MIECHV Grants - and for those that are not familiar, that's the Maternal Infant and Early Childhood Home Visiting Grants. There's a connection with those grants to, you know, overarching federal legislation and you talked about it earlier, evidence-based practice and other systems building - could you dive into that connection and kind of why that is so important?

JANET HORRAS [00:07:46]: Sure, it was one of the first national efforts to say we're gonna put \$440 million into home visiting across the country, but you can only use this on evidence-based home visiting models. And the federal government had a group that's called the Home V Study - and I can send you that link so you can share that with your listeners - but it lists, that these are people that have independently reviewed the research and then they have come up with these people or this program or model meets the criteria to be considered an evidence based programming that you can use MIECHV funding. If you decide to do, let's say you have something locally that you think works really well, you could invest in that, but you had to reserve 25% of the funds that you have invested for evaluation. So, evidence-based evaluation research is critically important in the MIECHV program. We're looking at what works for families, what we know works in trying to put our money for the best investment possible.

TOM OATES [00:08:46]: So, when this comes out, it sounds like clearly, you and the folks from Iowa start to run around and say hey, here's what we need, here's how we can apply it, here's how we can build it - and that's not so atypical from other states or other entities looking to boost the skills of their staff. But, what makes this unique, at least with the institute, is that it's a partnership not only with Iowa, but the State of Virginia. And so, I'm curious to how two states that, you know, demographically may be different, geographically are clearly not next door - how did this partnership happen to where the institute now really has become a little bit more than one state or one university trying to build something, but now we're seeing this cross-state collaboration?

JANET HORRAS [00:09:33]: We are definitely the odd couple, if you look at it on the surface of, you know, even our conversation about commute times, you know, it's very different talking about our, you know, there was a cow in the middle of the road, so it slowed me down getting to work kind of things, it's very, very different, our perspectives in life. However, what we had - which surprises people - is we had so much in common about where we were working on professional development. Our visions were very, very similar and we just kind of naturally gravitated toward each other when we heard each other talk at meetings, it was like, I wanna be working with her, I wanna work with Laurel and she's on a similar path and so how can we make this work? So, even though on the surface it appears the odd couple and our states are very, very different, we really came at this and our states were in a very similar position in that we really put an emphasis on professional development, it was very important. So, there was that and then the distance learning, high quality professional development, creating a credential, it was all very similar. Even though we had not met and discussed and outlined a strategic plan together, it was very similar, so we said let's work together and it's worked really well.

TOM OATES [00:10:52]: So, Laurel, now that this partnership has come into play and I'd argue that it would not just be Iowa and Virginia, but any agency is looking for their staff to build their skills, build their competencies and address especially the emerging needs and trends that we see through child welfare. And so, Janet touched base a little on the Career Compass and the Competency Framework - can you explain what the institute's done in terms of this Career Compass and what that would provide a user or participant?

LAUREL APARICIO [00:11:26]: Yeah, I think the Career Compass itself was a really innovative part of this overall concept for us because, as Janet said, we both came to this along relatively parallel paths that allowed us to come together around a common set of competencies and a framework of competencies and yet, we really understand as a multi-disciplinary, incredibly holistic feel. So, what that means in terms of our workforce and the folks who come to this work is that they come with very different backgrounds, very different experiences, both educationally, professionally. Highly diverse in terms of culture, ethnicity and so forth and what we were really attempting to do was say how can we create a structure that supports folks regardless of what model they're implementing - because there are a number of different models, as Janet discussed - regardless of what they're bringing already with them into their work and regardless of where they live, right?

[00:12:41]: Because if we wanna do something on a national level that really supports folks and helps to reduce duplication and replication and creates a system that really builds upon the public dollars that have been invested in our respective states and systems, then we need to be able to think about the individual user's experience. And so, when we do that, when we came to that, we said how are we gonna get there? And we're fortunate that we have partners, university partners that are supporting us in this work as well, and one of them is the University of Kansas and at the University of Kansas, they said, you know, there's this really cool tool that's used as part of special education to create individualized learning plans in a digital way and I wonder if that could be applied to the work that we're doing. And so, that's what the University of Kansas was able to do, we were able to really work together to create a digitized approach to creating an individualized learning plan. So, regardless of what folks bring in their experience and their existing knowledge base, they have the opportunity to really create a plan that's gonna best meet their needs - and not just their needs for learning but for time and efficiency. Because on the institute, we've got over 60 - e-learning alone - different topics, different opportunities for folks to take e-learning modules.

[00:14:29]: And then we know that at least for our home visitors, as well as lots of folks regardless of the field we're in, our child welfare partners just as much as colleagues, we are inundated with training opportunities right now and our home visitor time is at a premium because what they really want to be able to do is be out working with families and in that home and being a part of that process. And so, we really have tried to capitalize on this opportunity to not only use an e-learning experience for folks that can be accessible anywhere, even from their car - because that's where a lot of our home visitors spend 90% of their time - but also from their home, from a remote location and really directs them to what they need and doesn't just create a boilerplate list, if you will, which has been traditionally more of the experience for folks. It's been to direct them, you need training in all of these topic areas, regardless of whether you can demonstrate that you already know it. And so, that's really what the Career Compass is designed to do.

TOM OATES [00:15:45]: Janet had mentioned earlier of somebody sitting through 50 minutes of training where they were already familiar and only benefitting from 10 minutes of that and as you start to talk about administrators and trainers and managers who may have to deal with a turnover in case workers where you get new staff that maybe came from a different division or have a different background than other staff - well, one training isn't gonna fit everybody the same way, so if you're able to tailor to the individual, yet use one method, one venue, something like the institute, you can see the value that this would create. And, so part of this, you know the Compass, of course can help somebody chart their individual path, but this all kind of fits under what you guys have had and I'd like you to explain the National Family Support Competency Framework - what are those competencies? We've hinted at them during this conversation, what are those competencies and why are, why were those chosen?

JANET HORRAS [00:16:44]: Sure. We went through kind of a process of, first of all, looking at - this was about five years ago, I would say, that many states were starting to develop their own set of core competencies. That seemed very duplicative to, you know, how much different are the competencies in Iowa from Kansas, for example? I mean, really does home visitors need to know something completely different in Kansas? I don't think so. And even when you look at the differences, as I pointed out, in our states of Iowa and Virginia, competencies shouldn't be that much different to do the work. So, really thought benefit and less duplication and then we can then use that funding to do something different in your state if we develop a national set of competencies.

[00:17:28]: So, the Competency Framework is just that - it is one set of core competencies for home visitors. We're getting ready to release a set for supervisors - and when I say home visitors, it's really for direct service professionals, so, you can use whatever job title fits for that. But, it's looking at all the different domains - so, infant health, maternal health, self-sufficiency, family self-sufficiency, that would be another example - and then it gets down into beyond the domain, it goes into different indicators within that. So, we're looking at different, specific competencies and then there are levels within that. So, it sounds really complicated as I'm explaining it, but if you look at it, it's not that complicated. So, there's the first level is understanding. You know, you know where to find the information, so we don't expect you to, you know, have memorized the immunization schedule - I don't know what the immunization schedule is, but I do know where to find it. That's the competency level we're looking for.

[00:18:31]: The next level of competencies is I not only understand and I know where to find it, but I can actually, I can show you and practice that I know how to do this. The top level is how can you take this and practice and coach families on how to also use this and do this? So, you're extending that learning. And I know we have really great titles for these different levels than what I just described but those are the, to me those are the working of how it works and I think most people would understand that, too, those different levels and in some cases, you know, just understanding it is gonna be good enough. Like, the immunization schedule is a great example of that. Nobody needs to memorize that but we do want to be able to help families understand where would they find that, how would they locate that. Again, not to memorize it, but to know where our resources are at.

TOM OATES [00:19:21]: You know, I'd offer to you with those competencies and, you know, we were having this discussion earlier about, you know, what's the, what's the real connection when it comes to the child welfare profession and the audience, but as you mention, Janet, at the beginning and, Laurel, you too, I mean we are talking about prevention and when it comes to ensuring child safety, ensuring family self-sufficiency - that all falls under that prevention umbrella versus the reactionary nature of child protective services. Well, if we're trying to address these issues before they happen in the prevention realm and preventing child abuse and neglect, you know, I'd offer that most of these competencies have a pretty strong connection. But with all of them, I'd be curious to get your take on where you would guide child welfare administrators, child welfare trainers to say hey listen, these may be the competencies that have the most relevance to child welfare.

JANET HORRAS [00:20:20]: Now, I think what would be helpful is for them to take that Competency Framework and really do a weighting exercise so that they could identify, you know, based on our experience, the work in the field, this, these are the competencies that we say are the most critical because it's a little overwhelming, quite frankly, the framework. It's lengthy, it's detailed and it can seem a little overwhelming and yet, you know, my example of the immunization schedule is a great one of, how important is that? In the big scheme of things, not as important to know that this is the exact immunization, the vaccine that you get at this time, but to know where to find it. I think you will see

many things like that, but I think that weighting exercise would be really helpful for child welfare to look at that and say, you know, bring together some experts in the field and really look at those competencies because I agree with you, I don't think they're gonna be a lot different, just kind of like our experience of looking at what competencies were being developed by different states.

[00:21:20]: When we developed our Competency Framework, we looked at competencies in 21 states and did an overlay and there were many similarities. We had, we were lucky to have a PhD student at Iowa University doing this for us, they also identified a couple of gaps that no one had addressed in any really great depth. One of those was documentation, you know, ha ha. Who likes documentation? So is that a surprise that it got left out of all the other important things that we have to do with families, there was nothing about documenting your work. So, that's been added in.

TOM OATES [00:21:56]: You know -

LAUREL APARICIO [00:21:58]: Sorry, I was just gonna echo, as Janet said, I think when you take a look, our Competency Framework for home visitors is quite extensive - there's 10 different domains, we have over 100 different competency areas. Surprisingly, though, I think almost all of it is relatively transferrable to child welfare folks, staff, people and our partners in that work and we find that a lot of our partners and folks out in the field are actually already using many of our trainings. We actually partner together to create trainings that are used across our respective organizations and outside of the more specific areas around early childhood, for example, because that is the core focus of the work that we do in early childhood home visiting, everything else is really interchangeable to a great extent. We're focusing on dynamics of family relationships, enhancing and building parent-child interactions, understanding culture and really, effective family engagement. So, when we think about how does this translate, I think it all translates incredibly well, these are all the same skills that our partners and our colleagues in child welfare use in their work with families and children and more specifically, with really young kids when you talk about the focus on early childhood.

TOM OATES [00:23:35]: Yeah, and there's an alignment there with the protective factors, which anyone working in prevention or child welfare clearly understands not only the protective factors but the benefits thereof. So, you know, we get back to the idea of sitting in a training and really wondering what's the application here or am I being tested for something that I already know or when will I apply this - so, I'm gonna put on the devil's advocate hat here and ask how can then supervisors who may assign these kind of trainings and want to see their staff develop skills, how can they be assured that staff are actually building skills instead of merely passing the test?

JANET HORRAS [00:24:17]: I think that's a great question. I mean, one of the things to get to even which modules should you take is the pre-assessment. So, that's the beginning part of the Career Compass, there's a pre-assessment. It's going to say whether you've already mastered the skill or this competency area or this is one that's, that you need to strengthen and here are modules that will help you with that. So, the supervisor has access to that. So, that really is the basis for the individualized professional development plan, so to speak. And, from that then I think it's always the supervisor's responsibility to see how is it demonstrated and practiced so that difference between knowledge of I can know a lot of stuff, I'm a really good test taker, I really am - however, you wouldn't want me to do some of the things that I could take a test on and pass.

[00:25:09]: So, there is that step of observing and I think that there is a way - though this is not in the institute at this point in time, but it's like a phase two, phase three - of even uploading videos. So,

uploading videos of your work, of you actually demonstrating this particular skill set. So, I think there is more and more that we could be doing with recording visits or interactions with families that show how we're doing something that could be uploaded and then become part of your portfolio that demonstrates that you do have that skill set.

TOM OATES [00:25:42]: Just to kind of pull on that, you could also then show positive examples of here is this competency or this skill in practice.

JANET HORRAS [00:25:51]: Right. You could do that and your data should show that you're not very successful as a home visitor, though. So, you know, you could only lie so much and then your lies will catch up with you and you have to be consistent in telling a lie and where I think a good data system is going to catch you on that. So, you could say oh, you know, my families are all doing wonderful and I'm gonna cherry pick a home, a family to do a videotape with - your data still should cover all the families that you're working with and what outcomes they're achieving. So, not just did I deliver the services as intended, was I there for the home visit, but did this make a difference for the family, where did I move those protective factors? So, really looking at that I think is a critical part of being a good supervisor, as well.

LAUREL APARICIO [00:26:40]: And we have really built in as a part of our system, you know, when you think about e-learning and the opportunity to, I mean, we've all sat in front of a computer and just wanted to advance all the way to the end of a training and that's obviously not the most effective way for folks to learn. We know that and so, we've had the opportunity in our two states to really study this and better understand what are ways that we can really engage folks in retaining this information and being able to integrate it and take it into the field and really bring it to their practice with families.

[00:27:23]: And so, what we've been able to do is build in these supports, not just for the home visitor or the user of the training, but also for supervisors. It's, our entire system is built on what's called a transfer of learning philosophy and framework. And so, within all of our trainings, we offer opportunities for the individuals to both interact within the training in really innovative and creative ways - and we can give you some good examples of that, would love to do that - but also, for individuals or folks taking the training to reflect on what they've learned, because we know that real learning happens in that moment that we're able to integrate it into our understanding of the world and reflect on it, that's when it really happens. And so, we build in those times when folks can reflect and put down, write down, jot down - nothing fancy - those reflections. What they're thinking, what they're feeling about what they've learned, how they can carry it forward. The end of every e-learning, every one of these online trainings offers the opportunity for that home visitor to print out their reflections and their responses within the context of the e-learning module and then share that with their supervisor.

[00:28:51]: And then we also have resources and materials for the supervisor to use that relate back to every single one of the trainings to support their home visitors to ensure that they really are getting it, getting the information and are able to apply it. Or, if they aren't, the supervisor can really see where those areas are, where they might need a little more support, whether it's through another e-learning module or some coaching that they can do one on one with them or another staff member who has those skills or that experience can really help support them. So, in that way, we've really tried to create a system that again, supports folks regardless of what their resources may be. That's one of the biggest issues that we find in our state is that there's very disparate resource allocation, so some of our communities have lots of training opportunities and lots of resources for home visitors, our child welfare folks, whoever is out there working with families and others have incredibly limited resources. And so,

we worked hard to try to find ways to be creative to support what we're hearing from the field they really need. And so, those are some examples of how we do that to make sure folks aren't just good test takers or advancing through a training and not really getting all the information that's there.

TOM OATES [00:30:22]: Much like the Career Compass - and correct me if I'm wrong - of, you know, helping some, an individual chart their own path, allowing the supervisor to have that much insight into the skills that either are being developed or that are lacking, you're able to in both aspects meet somebody where they are and to where's the path that you need to go for your own development and what level are you currently and how can you support that growth after the test is done, after the training is done? Because the training can sit there and take your post-test and well, your score is then your score. So, where do you go from there? And so, that's a really interesting aspect of, not only are we talking about training, but we're really talking about skill development over time in the areas that an individual needs to develop those skills. So, I'm curious about the courses themselves - how are these courses, you know, selected or how are they developed for the Institute?

LAUREL APARICIO [00:31:25]: Well, we really, initially, we were able to take that framework. Both our states, the way we came together as Janet shared was, we were on these parallel paths and in both of our states we were already creating e-learning opportunities and we recognized that there was not, you know, where was the opportunity for states who didn't have resources or folks who didn't have access to this to be able to access it? We were offering it free, but folks didn't know about it, necessarily. And so, once we were able to develop that Competency Framework that we've talked about, we were able to take a step back and say, okay, now, with the existing trainings that we have in place in our respective states, how well are we covering these competencies?

[00:32:17]: If we want folks to be able to at the end of this come out on a pathway that allows them to gain all of the knowledge and skills to meet these competencies, then we need to be able to have the trainings to support that. And so, we took a really deep dive into each of our respective trainings and say where are we already doing a good job of meeting the competencies and where are the gaps? And once we identified the gaps, that's how we prioritized the training topics initially. I would say outside of that, we've done a great job of being able, through some of our initial funding, to address those gaps, but outside of that, the next step is we have folks calling us all the time that wanna partner. And so, sometimes what happens is those partnerships lead to additional offerings or an opportunity to really expand something that we just didn't have the resources to do initially in a new and different way. And again, Janet, I don't know if you wanna address some of that, too, but I'm always happy to, I can give you lots of great examples of how we've been able to partner with different folks to create some of those modules.

JANET HORRAS [00:33:36]: Sure, it's states and foundations. We had the Delta Dental Iowa Foundation approach us saying, you know, how do you train home visitors on oral health? So, we looked to see what we did and there was a little bit but just a few mentions and said, okay, that's something that we're not doing as comprehensive a job as we could. So, they funded an oral health education module. Another is a state that we're working with right now is struggling with reflective supervision and saying this is important, this is required by MIECHV and yet, we don't have a great way of training people consistently. And that's, quite frankly, that's a national issue. And, so they're interested in putting money toward creating an endorsement for supervisors in reflective supervision. I think that has a lot of applicability outside of early childhood home visiting, as well, especially when we look at infant mental health and how different states are working on systems of infant mental health. So, we're real excited about that.

[00:34:37]: So, it's a, you know, it's not just we have money, we wanna fund this, it really is looking back at what do we already have, how does it fit within the framework and making those very informed decisions about, yes, we will move forward with this and, so, it's not just who has money, but really does it meet a need?

TOM OATES [00:34:58]: So, with all of these other partners with, you know, be it states or be it, you know, organizations and foundations - where are the standards, where are the requirements for courses that end up on the Institute?

JANET HORRAS [00:35:12]: You know, we really had to, that was another place that I think coming together we had to determine what are we going to use to make sure that we keep our quality the same. And so, one of the decisions that we made was that James Madison University - which has been a partner with Virginia for many years - would be always the entity that would create modules. And Laurel and her staff in Virginia has people that work on content expertise. We also have two different professional development advisory committees in our states. So, we have a Virginia one, an Iowa one, they have come together. So, those are home visitors and supervisors in our respective states that have come together - I know that they would love to meet each other face to face sometime. But, they have also provided content expertise and advice, reviewing scripts, reviewing content to make sure that James Madison is hitting the mark every single time.

TOM OATES [00:36:07]: Interesting that the partnerships continue be it states and foundations, be it states and states, but now you're getting at that level where if everybody's got that kind of as we started this entire episode - what's the common goal, what's the common need. And whatever differences you may see on the surface, they don't go so far as the real common goals that everybody has. So, Laurel, I understand that there is a certification, a home visiting certification - has that been established by the Institute and really, who is it for?

JANET HORRAS [00:36:41]: Yeah, so, at this point, we are working to finalize the certification as part of that and we really want to use the pre-assessment that we've been able to develop to guide the Career Compass. That needed to be in place for use first because we wanted to make sure whatever we did - certifications have consequences, right, when we think about workforce and we haven't even talked a whole lot about the impact of professional development and some of the rationales for how we got into this work to support our workforce, but they have real consequences. So, we needed to ensure that we had that pre-assessment and all of the training supports in place first before we moved to finalizing a certification. So, that's where we are at the moment. We are building that and hope to launch it within the next six months.

[00:37:38]: And, the certification really will be for home visitors. That doesn't mean that it's not applicable for other folks, that other folks may not find it applicable, but that's our desire. This is, our field has never had anything that defined it. This Competency Framework that we've adopted at the national level and have had so much incredible input into is the first time anything has ever been done at a national level for home visiting to define our field and this certification will be the first certification that really, again, crosses across states, models and disciplines to support our field and to really, not just demonstrate but recognize all of the incredible work and the skills and knowledge that goes into doing this work and how valuable that is to recognize for our workforce, as well, is a big part of our desire in putting forward a certification part and piece to this institute.

TOM OATES [00:38:55]: And are CEUs gonna be on the horizon?

JANET HORRAS [00:38:57]: Yes, CEUs will be available here within the next couple of months, we've already put that together. CEU's can be quite costly if you do it by training in an e-learning environment, so, what we've done is we have created bundles where we've pulled together about 10 different trainings into different competency domain areas, topical areas so that when folks seek CEU's, they can just pay once for a series of trainings, so, a \$25 fee for a nice chunk of CEUs versus having to pay for each individual CEU, each individual learning, e-learning. And that will be offered through James Madison University, as well.

TOM OATES [00:39:48]: So, finally, Laurel and Janet, I'd love to get your take on what you would tell a training director, an administrator or other manager of a child welfare agency or any organization that has a connection to child welfare why they should spend their time or add into the training program, understanding how time consuming they can be, why the Institute may be the route for them to go? I know I'm basically teeing it up for you guys to pitch why - but, what is it that separates the Institute from maybe others that maybe child welfare agencies may need to really take a look at if they're looking for the betterment of their own staff?

JANET HORRAS [00:40:31]: I'll start. This is Janet, and I really think that the difference is, well there's several. Number one, it's free, that's a big one, you know, the cost is always important. But the quality aspects and the technology that we use on this distance learning, it is very different than anything you've seen before. So, very interactive - we use things like 360-degree video that's very engaging, we have things like - I know we don't call it choose your own adventure, but that's what I always think of it as, you remember those books of where you get to a certain point and then you gotta make a decision? We've got that with videos of home visits. And so, you're following this home visitor into this family's home and you get to a critical place and you gotta decide what do I do next. And, it ends, I mean if you make all the bad decisions, you end with being very politely asked to leave the home, which, you know, they're very polite about it but that is what can happen, it's very realistic.

[00:41:30]: And so, to have those kinds of experiences, I just don't see that in other training that's available. I mean, we really have taken technology to a different level in the things that we've offered within our modules. And, the other part of it is, I think, that home visitor input, as I mentioned both our Iowa and Virginia home visitors and supervisors have been critically important in developing the content and so when it's for us, by us, it makes sense. So, it's been developed by people in the field, not people just in an academic university isolated from reality, it's been people that know what it's like to have, you know, somebody laying on the couch not participating in the home visit, smoking, someone else walk in, you know, three or four people in the house, I mean, the chaos that happens which is really similar to the child welfare system. So, it's people that know that and understand that and understand the challenges. And so, I think that they're, they're more relevant than what you're going to see in other places.

LAUREL APARICIO [00:42:33]: I would absolutely agree with Janet, no surprise. It's really all about the accessibility and when I talk about accessibility it's about having trainings that really reflect the folks that are doing the work. They are a big part of helping us develop what we do, we keep it incredibly relevant in that way and accessible. And, when we think about, when I think about my background, I am a social worker and my background is child welfare and foster care and when I think about the different modules that we have that really can support a child welfare folks, it's been about involving child welfare folks in helping to design that. So, even when we are doing something that's designed for home visitors, we are not doing it only through our own lens. We have actually partnered with our state

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Department of Social Services and we have, we've created the mandated reporter training that lives on our Institute that's also used for our entire state.

[00:43:48]: So, we're really, really committed to making sure this works for the people who are using it, that their voice is a part of it and that they feel really good about what they're getting from it and they feel like it reflects them - who they are, their values, their work and their passion when they go out to visit families, to support families, to do the work that is so meaningful to all of us that brings us all to this place.

JANET HORRAS [00:44:23]: One other thing I want to add is, I do think that the way we represent families, the folks that we serve, and the parents and the children is very much a strength-based way consistently. So, it's not, it doesn't promote a culture of these people are bad and you have to go in and fix them, it's these people are good, they have, they're dealing with big struggles and big problems and our role is to figure out what are their strengths, help them identify their strengths and build upon those strengths. And that is, I think, very, very different than the typical training, as well.

TOM OATES [00:45:00]: Laurel Aparicio, Janet Horras, I appreciate you both for one thing, I appreciate you guys coming together and working on this from across the country and I really appreciate you guys spending some time and sharing your insight with us here on the Child Welfare Information Gateway Podcast.

JANET HORRAS [00:45:16]: Thank you so much.

[00:45:20]: If you head on over to this episode's webpage – and all the episode pages can be found at www.Childwelfare.gov, we'll have links to some additional information and resources including the home visitation study Janet mentioned. We'll also link you over to the Institute for the Advancement of Family Support Professionals. We've got additional home visiting resources on Child Welfare Information Gateway, and so we'll also point you to some training materials to help support this – including CapLEARN, the Children's Bureau's online learning platform filled with courses and learning experiences sponsored by the Children's Bureau. Speaking of training, we'll also have a link to a recent episode of the podcast where we explored how virtual reality is being used in caseworker training – specifically in conducting home visits – and it was created by the University of Utah.

[00:46:06]: As always, you can check out Child Welfare Information Gateway for information and resources on best practices, child welfare-related data, tools and resources that you can provide the families or communities you work with, the latest information on state statutes and policies connected to child welfare, you can find our series of publications, or even contact information for related organizations and groups surrounding adoption, foster care, and preventing child abuse and neglect. So, my thanks to Janet Horras and Laurel Aparicio for spending their time and energy with us and sharing their insights. And as always, 50 episodes strong, thank you for being a part of this community and taking your time to join us here on the Child Welfare Information Gateway podcast. For now, I'm Tom Oates, have a great day.

FEMALE NARRATOR [00:46:56]: Thanks for joining us for this edition of the Child Welfare Information Gateway podcast. Child Welfare Information Gateway is available at www.childwelfare.gov and is a service of the Children's Bureau, U.S. Department of Health and Human Services Administration for

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