



During this unprecedented, COVID-19 public health crisis, leaders in the national home visiting field have formed a rapid response collaborative to create and support the dissemination of free resources on virtual family interactions for home visitors.

What is the project?

The Rapid Response Virtual Home Visiting (RR VHV) project is a field facing collaboration, spurred by recent social distancing measures and the increased isolation of families and represents a full-throttle effort to provide rapid, best practice principles and strategies to support home visiting professionals in maintaining meaningful connections with families during the health crisis.

What to expect from the project?

Content will be developed, or repurposed, covering at minimum:

- Using interactive video conferencing and telecommunication to deliver visits
- Conducting other model activities virtually including coaching, information sharing, goal setting, resourcing supports for families
- Conducting screenings – child development, depression, Intimate Partner Violence (IPV)
- Hosting virtual group connections

Content and resource needs will be added throughout the project. Please share the areas of support you need through rapidresponse@nationalalliancehvmodels.org.

Resource Details

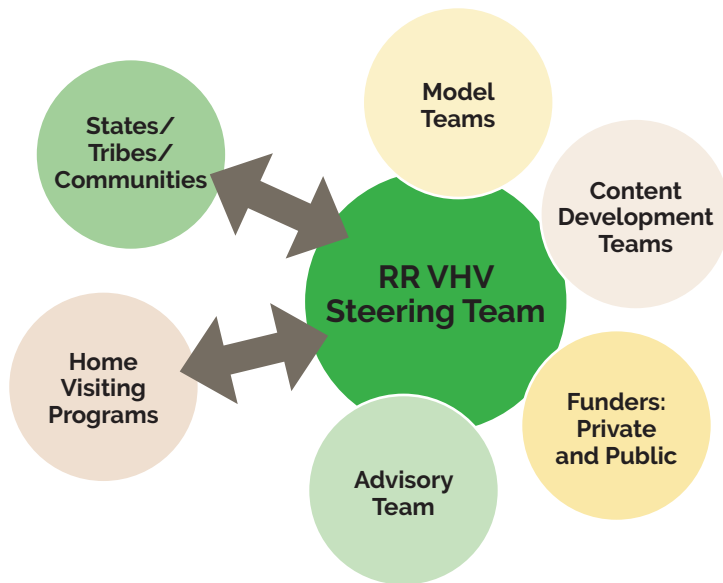
- Materials produced and disseminated are available to models and field-facing partners at no cost
- Weekly webinars held Wednesday at 2:00 pm Central Time
- Linkage to these webinars and other training content at the Institute site, institutesp.org
- Resources on virtual interactions with families and best practices in telehealth activities

Registration details for webinars and calendar of meeting dates of the various teams is found at the Institute website at <https://institutesp.org/covid-19-rapid-response>.

How do I get Involved?

The RR VHV project is led by a partnership of the Institute for the Advancement of Family Support Professionals, Parents as Teachers National Center and the National Alliance of Home Visiting Models. These three partners make up the Steering Team guiding the rapid cycle of development, input, dissemination and growth that the project needs to continually meet the needs of the field.

The project has multiple elements to the work to ensure diverse input and engagement; this engagement includes an Advisory Team (initially identified members listed below), Model Teams encompassing all the national and regional models, and Content Development Teams. Please email rapidresponse@nationalalliancehvmodels.org to join one of the teams.



Advisory Team:

- Association of State and Tribal HV Initiatives
- Brazelton Touchpoints
- Dr. Dorian Traube and University of Southern California
- Home Visiting Applied Research Collaborative (HARC)
- National HV Network
- Health Resources and Services Administration (HRSA)/ Administration for Children and Families (ACF)/ Office of Planning, Research and Evaluation (OPRE)
- HV-IMPACT
- National HV Resource Center
- Ounce of Prevention
- Programmatic Assistance for Tribal Home Visiting
- State Systems
- Tribal Evaluation Institute

GUIDING PRINCIPLES

Accessible:

All information and resources shared will be designed to meet the needs of all home visiting professionals.

All materials will be provided free of charge and made accessible to providers through the Institute as well as other multiple platforms.

All materials developed will remain available to support future needs of the field.

Strength-based:

Include as many provider networks as possible in content and resource development.

All providers bring unique and important views. Expertise will be sought based on content area and specific needs.

Every effort will be made to be as inclusive as possible. However, it is important to remember that no one individual or organization is expected to have expertise in every area.

Shared Responsibility:

RR VHV will create a streamlined process for information gathering and sharing that is inclusive of all providers.

RR VHV will create content that reflects the collective voice of all participating provider networks.

It will be up to each provider network to determine the most efficient way for inclusion in rapid decision making and content review.

To maintain a rapid response framework, perfection may not be possible. Deadlines will not be flexible.

Each provider network is responsible for sharing this work with local providers.

