



June 20, 2023

The Honorable Aysha E. Schomburg, JD  
Associate Commissioner, Children's Bureau  
Administration on Children, Youth and Families  
Department of Health and Human Services  
330 C Street, S.W.,  
Washington, D.C. 20201

Dear Associate Commissioner Schomburg:

On behalf of the steering committee of the National Home Visiting Coalition, we are writing to provide insight into the barriers to timely and robust implementation of in-home parent skill-based programs, also known as home visiting, through the Family First Prevention Services Act (Family First). Additionally, and in the spirit of partnership and collaboration, we will also offer recommendations we believe will contribute to the successful implementation of this landmark legislation.

The [National Home Visiting Coalition](#) is a diverse group of organizations committed to the well-being of children, united to promote federal support of home visiting to strengthen families in communities across the country. Many of our organizations championed and supported passage of Family First and we are eager to partner with the Children's Bureau to ensure effective implementation in every state resulting in families staying safely together and preventing unnecessary out-of-home placements.

We share the belief that Family First is an important reform to child welfare practices that shifts support to families upstream to include services, like home visiting, that prevent placement in foster care. But to realize this vision, it is essential that every state sees a pathway to timely and rigorous implementation of all qualifying services. Regarding qualifying services, home visiting is significant. Every year, approximately 42% of the children placed in foster care are age five and under. The evidence-based home visiting programs approved as well-supported through the clearinghouse are designed, and demonstrate evidence for, families with children within this age range. As such, the robust implementation of in-home parenting skill-based programming through evidence-based home visiting is well positioned to assist the Children's Bureau in meeting your goals. We offer the following recommendations to advance our shared objectives.



## **Barriers to Optimal Implementation of In-Home Parent Skill-Based Programs**

The following are some barriers that we urge the Children’s Bureau to resolve in order to accelerate the implementation of evidence-based, trauma-informed home visiting support to children and families who meet criteria for Family First.

### *Determining Candidacy*

The opening of Title IV-E funding for services to prevent unnecessary foster care without regard to family outcome is a transformational change to child welfare financing. One of the challenges with operationalizing it in the context of home visiting is balancing the tension between the law’s focus on children at imminent risk of entry into care with the voluntary nature of home visiting. Home visiting works best when families are reached before they are in a serious crisis and have the emotional bandwidth to build a trusting relationship with a home visitor.

We were excited by the recent guidance from the Children’s Bureau that clarified IV-E prevention services do not require a family to have an open child welfare case. This policy aligns well with the practices of the evidence-based home visiting programs that are approved for in-home parenting support under Family First. These practices include effective recruitment of pregnant people and families with young children through community pathways to participate in voluntary services. We appreciate the Children’s Bureau efforts to revise IV-E as a family wellbeing system; however, that change will take time and the reality is that having an open child welfare case has not historically felt voluntary to families. Unfortunately, a substantial number of IV-E prevention plans were approved prior to the recent guidance and include expectations to open a case. We welcome the opportunity to work with the Children’s Bureau to integrate this clarification into previously approved plans. Removing this barrier reinforces the voluntary nature of home visiting services and can increase acceptance of these evidence-based services to reduce child maltreatment and out of home placements.

### *Clear Guidance*

Additionally, for states with approved state plans, there is a gap between the planning and the implementation of IV-E prevention plan services. In many cases states have not yet fully operationalized their plans and are seeking clarity from the Children’s Bureau to effectively implement their programs, akin to the type of clear guidance issued for the drafting of state plans. States are understandably cautious in their early implementation of these major policy



changes, and in the absence of explicit guidance are more likely to narrow implementation approaches. Clear guidance will better position states to embrace the sort of flexibility the Children's Bureau has communicated as a benefit of Title IV-E.

### *Financing*

Evidence-based home visiting is a comprehensive family support rather than a set of discrete activities with associated codes. While home visiting includes activities such as screening that might be coded in other disciplines, it is only a component of the services. It is important that states reimburse home visiting providers for the comprehensive nature of this family support. There are some states developing financing strategies that work for both the state IV-E agency and the home visiting providers. We recommend that these effective approaches to reimbursement be collected and widely shared with the field.

### **Conclusion**

Thank you again for the additional guidance offered by the Children's Bureau in the Dear Colleague letter of February 28. This level of detail and clarity is extremely helpful to state child welfare agencies, as well as to the home visiting programs who work with them. We believe that, with the right guidance to and support for state child welfare agencies, Family First can fulfill its promise as a paradigmatic shift that will emphasize prevention and the strengthening of families. Removing barriers to funding home visiting services through Family First will facilitate the transformational change envisioned in the legislation and make the promise of Family First real for more children and their families.

Our organizations stand ready to work with the Children's Bureau to improve the ways that home visiting programs can access these critical resources and improve the health and well-being of children and their families. Thank you for your consideration.



Sincerely,

American Academy of Pediatrics  
Association of Maternal & Child Health Programs  
Association of State and Tribal Home Visiting Initiatives  
Child First  
First 5 LA  
First Five California  
First Five Years Fund  
First Focus on Children  
Healthy Families America  
Home Instruction for Parents of Preschool Youngsters  
Nurse-Family Partnership  
Parents as Teachers  
Prevent Child Abuse America  
Start Early  
ZERO TO THREE