



Assistant Secretary Lynn Johnson  
Administration for Children and Families  
US Department of Health and Human Services  
330 C St. SW, Washington DC 20201

Proposed Information Collection Activity; Family Level Assessment and State of Home Visiting (FLASH-V) Outreach and Recruitment Study (New Collection)

March 23, 2020

Dear Assistant Secretary Johnson,

I am writing on behalf of Home Instruction for Parents of Preschool Youngsters (HIPPY) USA to respond to the Administration for Children and Families' request for comment on the proposed information collection activity titled, Family Level Assessment and State of Home Visiting (FLASH-V) Outreach and Recruitment Study. HIPPY is an evidence-based home visiting program based in Little Rock, Arkansas, with programs in 19 states. Our home visiting services to families are often funded by a combination of federal, state, and local funds. We appreciate ACF's efforts to identify actionable bottlenecks in the recruitment and enrollment process and test new strategies to improve the delivery of MIECHV-funded services and overcome caseload challenges. In order to ensure that our comments reflect the questions and concerns of our local partners, HIPPY convened a conference call of our field to share information and collect feedback from our local implementing agencies (LIAs). These comments incorporate input from both the HIPPY USA national office and HIPPY USA local partners around the country.

Before offering observations regarding the details of the FLASH-V study, we would like to offer a global observation. The purpose of this study seems to be focused on identifying areas where LIAs and referral partners can better cooperate and coordinate so that more families are able to enroll in MIECHV services. As a result, it misses out on an opportunity to examine the challenges faced by programs that are at capacity. Even though communities around the country have access to Home Instruction for Parents of Preschool Youngsters (HIPPY) and other home visiting services, collectively we are only currently serving approximately three percent of families eligible and in need of those services. In many cases, LIAs simply do not have the ability to serve all eligible families in their community because of a lack of available resources. Only considering programs that are under capacity overlooks this reality, and prevents study results from being more broadly applicable and useful for the majority of LIAs that are struggling to find ways to increase their bandwidth and meet the needs of families in their community with limited resources. While HIPPY understands the need to examine this piece of the puzzle, we encourage ACF to similarly review existing challenges

and develop and test strategies for LIAs that have maxed out their program capacity but underserve their local community.

While reviewing the notice and associated instruments, HIPPIY USA and our local partners identified several areas requiring clarification in future guidance.

First, the notice and description of the FLASH-V study does not mention that it is voluntary. Instructions on the instruments themselves seem to indicate that this is a purely voluntary study, with all collected information being kept private to the extent possible. Nevertheless, confirmation in the guidance itself would be helpful. It would also be helpful to include the desired study population in future notices. The “LIA Eligibility Assessment Form” instructs LIAs to complete the form only if they are typically or currently under capacity, defined as providing home visiting services to less than 85 percent of the maximum caseload size of home visitors at least half of the time in the past year. Having this information in future notices/guidance, along with the voluntary nature of the study, would be helpful for our LIAs.

Another area for clarification is the process by which LIAs will be identified for this study. The notice lays out two data collection phases, but does not provide additional details on the identification process. Which LIAs will be asked to go through these two phases? Will the “LIA Eligibility Assessment Form” be sent to all MIECHV LIAs? Will HIPPIY be asked to identify LIAs meeting the capacity criteria, and then direct them to the study? Is ACF relying entirely on responses from HARC members to the “Request for LIA Recommendations from HARC State Networks”? HIPPIY would be grateful for additional information on this process, particularly regarding which organizations/groups will be asked to identify and recommend under-capacity LIAs for this study.

On an association-wide call, our LIAs questioned the usefulness of this study in identifying effective referral practices. While it is evident that this study would be helpful in identifying bottlenecks in that part of the system, restricting the study population to under-capacity LIAs limits the ability of the study to identify effective practices that other LIAs are already implementing with regards to meeting their caseload. HIPPIY strongly resonates with the desire in the notice to promote innovation and “allow for the development and testing of strategies to improve the delivery of MIECHV-funded services.” With that being said, we wonder if the limitation to under-capacity LIAs will result in overlooking impactful strategies that have proven to be effective over time for LIAs with full caseloads.

Thank you for your attention to these comments. HIPPIY USA appreciates the opportunity to share feedback on the FLASH-V study, and stands ready to work with the Administration for Children and Families and with states to connect more families with home visiting services and to improve outcomes for parents and their children.

Sincerely,

A handwritten signature in blue ink, appearing to read "Staci Croom-Raley". The signature is fluid and cursive, with the first name "Staci" being more prominent than the last name "Croom-Raley".

Staci Croom-Raley  
Executive Director