

Lead the Change



STAFF RECRUITMENT AND RETENTION Playbook

November 2023

For questions, please contact us at hvcoiin@edc.org

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number UF4MC26525, Home Visiting Collaborative Improvement and Innovation Network (HV CoIIN). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.



Table of Contents

Introduction	2
About This Document	3
Key Driver Diagram	3
Change Package	3
Measurement System.....	3
Key Driver Diagram	4
The Change Package	5
PD1: Hiring Practices.....	5
PD2: Home visiting workforce supports	7
PD3: Physical and psychological health, wellness, and balance of home visiting professionals	9
PD4: Teamwork and Communication	11
The Measurement System Cheat Sheet	14
Acknowledgements	16

Introduction

Evidence-based home visiting programs have demonstrated positive effects on children and families, including improvements in maternal and child health, child development, and parenting practices (Michalopoulos et al., 2015). Home Visitors and Supervisors are the foundation of home visiting programs success. However, without a comprehensive and integrated system of recruitment, professional development, reflective practices, and wellness supports for home visitors and supervisors, stress, burnout, and turnover threaten the quality and impact of home visiting services (Alitz et al., 2018; Begic et al., 2019). Staff turnover can pose a significant challenge for program quality, model fidelity and costs, negatively impact retention and outcomes among families, and create low morale among home visiting teams (Education Development Center, 2019).

“Individuals who experience unfairness and inequity at work, or even outside of work, feel disempowered and will likely disengage, regardless of the basis for the inequity,”
(Perlo et al., 2017).

Ensuring recruitment and retention of an equitable and diverse home visitor workforce with the knowledge and skills and understanding of what the job entails can support staff retention and longevity (Sandstrom et al., 2020). Research has shown that families were more engaged with home visiting when programs matched a greater proportion of home visitors to families in terms of sociodemographic characteristics, including race or ethnicity (Daro, McCurdy, Falconnier, & Stojanovic, 2003). Ensuring an equitable and diverse home visitor workforce therefore supports not only a healthy work environment, but also the experiences and outcomes of the families being served (West et al., 2011).

OPPORTUNITIES TO CREATE A WORKFORCE IN SUPPORT OF FAMILIES

Recruitment

- Home visitors and supervisors are diverse in age, but they lack gender diversity and are not as racially and ethnically diverse as the families they serve. 63% identify as non-Hispanic white, 13% are non-Hispanic black, 16% are Hispanic, and 2% identify as Asian. 17% of home visitors are fluent in Spanish and 5% are fluent in another language other than English (Sandstrom et al., 2020).
- One-third of program managers report currently having one or more vacancies for home visitor positions (Sandstrom et al., 2020).

Retention

- Home visitors cite low pay / less benefits, excessive paperwork, burnout /heavy caseload, and personal reasons not specific to home visitation work as common reasons for leaving their jobs (Sandstrom et al., 2020; Franko et al., 2019).

Wellbeing

- Evidence indicates that quality reflective supervision, leadership, supervisory and coworker support, opportunities for leadership and advancement and trauma-informed supports for wellbeing and resiliency are all critical for reducing home visiting staff burnout and increasing wellbeing (Sandstrom et al., 2020; Roberts et al. 2019; Becker et al., 2016).

About This Document

Key Driver Diagram

The Key Driver Diagram displays a shared theory of how outcomes might improve based on information gathered from research, observation, and experience, and sets forth the collaborative's goal. The primary drivers represent key components of the system that need to be in place to achieve the goal.

Change Package

The Change Package identifies a set of changes (i.e., how to put primary drivers in place) and offers links to resources to support these interventions. The Change Package lays out change ideas to help home visiting programs improve staff recruitment and retention up to their highest levels of influence (home visiting staff, program, organization or agency, and the local community).

Measurement System

The Measurement System Cheat Sheet lists the shared aims and set of common measures that teams will report during the collaborative. Data are graphed on run charts and shared with all participants to promote shared learning.

Key Driver Diagram

Goal	Primary Driver (PD) <i>Critical system elements that are necessary and sufficient to achieve the goal</i>
<p>HV CoIIN participants will work to improve the professional well-being of home visitors and home visiting supervisors, including:</p> <ul style="list-style-type: none"> • Job and pay satisfaction, • Psychological well-being, • Self-efficacy and confidence, and • Job meaning and fulfillment. <p>By April 2024, 85% of home visiting staff will report they always feel supported to manage their work and still be present for the families or staff they support.</p>	<p>PD1: Hiring Practices</p>
	<p>PD2: Home visiting workforce supports</p>
	<p>PD3: Physical and psychological health, wellness, and balance of home visiting professionals</p>
	<p>PD4: Teamwork and Communication</p>

Change Package

PD1: Hiring Practices

Secondary Driver (SD)	Change Ideas (for LIAs)	PDSA Examples	Resources
When recruiting	Create recruitment & outreach action plans to reach diverse community members, including former program participants	PD1.SD1.C1.Example 1. Recruitment Fair.docx	<ul style="list-style-type: none"> • Head Start Program Performance Standards require programs to provide parents with the opportunities to participate in the program as employees or volunteers and offer resources to enhance parents' advocacy and leadership skills. • HRSA's Checklist for Staff Recruitment and Staff Retention recommends posing questions that will help you explore the candidates' attitudes and skills (e.g., <i>How will you work with people whose beliefs are different from yours?</i>) • Infusing Cultural & Linguistic Competence into the Recruitment and Retention of Home Visitors • Introduction to Competency-Based Hiring • Recruiting and Training Home Visitors for Evidence Based Home Visiting • Sample Job description for home visitors • Sample process maps and recruiting and onboarding plans from teams
	Partner with nearby community colleges / universities to introduce the home visiting field to students	PD1.SD1.C2.Example 1. Partnering with Community colleges universities.docx	
	Develop clear and accurate job descriptions that include home visiting competencies staff must bring to the job	PD1.SD1.C3.Example1. Job Description Specificity.docx	
	Use videos or live opportunities to shadow / experience a day in the life of a home visitor	PD1.SD1.C4. Example 1. Shadowing .docx	

			<ul style="list-style-type: none"> • Toolkit for Recruiting and Hiring a More Diverse Workforce includes strategies and tips to inform your recruitment plan. • Why I am a Home Visitor video
When interviewing	Use diverse interview panels, including home visitors, to assess candidates and make hiring decisions	PD1.SD2.C1. Example 1. HV rating tool .docx	<ul style="list-style-type: none"> • Centering Equity in your interview questions from the Health Equity CoIIN • Considerations for selecting candidates to interview • Onboarding series: <ul style="list-style-type: none"> ○ Home Visiting 101- Importance of Home Visiting ○ Home Visiting 102- Home Visitor Skills and Strategies ○ Home Visiting 103- Professional Practice • The Best Practices for Onboarding New MIECHV Employees Toolkit from HRSA provides recommended activities and an onboarding log for use with home visiting staff. • The Best Practices Hiring Guide for Increasing African American Home Visiting Staff • The First Six Months Workbook examines the onboarding process from the supervisor perspective with a focus on helping new staff manage the stressors of a job in the field of child and family services. • View the following four-minute video on Conducting Unbiased Interviews to understand how and why we are all susceptible to acting on our unconscious bias in the interview process.
	Include interview questions and scoring criteria that explicitly ask about candidate experiences and values with equity, inclusion, and cultural competency	PD1.SD2.C2. Example 1. Diversity and Equity Interview Questions.docx	
	Develop onboarding process that extends through the majority of the first year of work	PD1.SD2.C3. Example 1. Teaming approach to onboarding.docx PD1.SD2.C3. Example 2. Team approach to training .docx	

PD2: Home visiting workforce supports

Secondary Driver (SD)	Change Ideas (for LIAs)	PDSA Examples	Resources
During initial and ongoing professional development	Provide mentoring / coaching / leadership program for all staff – including tailored opportunities for new staff, professionals of color, and seasoned staff	PD2.SD1.C1. Example 1. Rounding Form.docx	<ul style="list-style-type: none"> • Access the Institute for the Advancement of Family Support Professionals for live and on demand trainings, certifications and resources • Achieve OnDemand™ offers online training and peer learning for home visiting professionals based on a set of cross-model competencies developed by the Ounce. • Competency frameworks, such as the National Family Support Competency Framework for Family Support Professionals or the Competency Guidelines® for Culturally Sensitive, Relationship-Focused Practice Promoting Infant & Early Childhood Mental Health, can be used to assess current training and skills and plan for appropriate professional development. • Consider Racial Equity and Implicit Bias training for all staff. <ul style="list-style-type: none"> ○ The Racial Equity Institute offer a Groundwater Training ○ IFSP offers online modules in cultural humility and its application in supporting immigrant families and dual language learners. ○ Georgetown University’s National Center for Cultural Competence offers online training and learning tools to support professionals with incorporating cultural and linguistic competence into their work. • Example Rounding Form from Help me Grow • Learning in: From Racism to Racial Equity Module
	Offer in person and online workshops, conferences, and professional development courses that align with professional goals	PD2.SD1.C2. Example 1. Professional goals growth assessment .docx	
	Home visitors serve as program representatives at advisory board, leadership, or partner meetings	PD2.SD1.C3. Example 1. Provide updates to Board of Health .docx	
	Train all staff in the following: cultural competence, implicit bias, trauma-informed practice, courageous conversations on equity and oppression, and psychological safety	PD2.SD1.C4.Example 1. Cultural Competency Training.docx	

			<ul style="list-style-type: none"> • NACCHO toolkit provides a blueprint for building an equitable workplace at local health departments. It addresses many staff recruitment and retention topics such as professional development, hiring, and advancement. • MCH Navigator offers online learning opportunities for those in the maternal and child health field. • Pair new staff with an existing employee for their first few months to help them connect with co-workers and acclimate to the organization’s processes and culture. Head Start’s ECLKC Introduction to Mentor Coaching. • The Kirwan Institute for the Study of Race and Ethnicity offers self-paced implicit bias training. The modules are tailored to those who work in K-12 education or related fields, but much of the content is generalizable to a broader audience.
At reflective supervision (supervisors & home visitors)	Provide reflective supervision training and mentoring for home visiting supervisors	PD2.SD2.C1.Example 1.Joint reflective supervision planning form.docx	<ul style="list-style-type: none"> • Beyond the Home Visit: Supervision, Professional Development and Community Connections Module • Head Start’s Early Childhood Learning & Knowledge Center offers Tips on Becoming a Reflective Supervisor and Supervisee, as well as a number of videos and other supports to assist with the development and application of reflective skills. • Juneau Adam’s Getting Ready for Reflective Supervision Form • Reflective Supervision 1: Reflective Practice for Family Support Professionals Module • Reflective Supervision 2: Foundations in Reflective Supervision for Supervisors Module
	Schedule consistent reflective supervision for all staff (home visitors, supervisors, program leads) with shared agenda setting	PD2.SD2.C2. Example 1. Reflective supervision reminders.docx PD2.SD2.C2.Example 2. HV input on reflective supervision.docx	
	Do routine assessment of professional goals, growth area, and stretch goals at least annually	PD2.SD2.C3.Example 1. Annual Professional Development Goals.docx	

			<ul style="list-style-type: none"> • Region X's Reflective Supervision Guidelines and accompanying self-assessment tools for administrators/program leads, supervisors and home visitors (available in English and Spanish) • The Home Visiting Rapid Response team offers a recorded webinar and tip sheet to support high-quality virtual reflective supervision. • The Minnesota Department of Health successfully piloted and then implemented a mentoring approach to support home visiting supervisors in building their reflective supervision capacity. • Your state's infant mental health association can help connect home visiting programs with trained reflective mentors and consultants.
--	--	--	--

PD3: Physical and psychological health, wellness, and balance of home visiting professionals

Secondary Driver (SD)	Change Ideas (for LIAs)	PDSA Examples	Resources
For or during home visits	Use mobile apps to check in / know home visitors' location in the field	PD3.SD1.C1.Example 1. Mobile Check In.docx	<ul style="list-style-type: none"> • Apps like Life360, Connecteam, Safepoint, and PeopleSafe among others offer real-time location of members in your private network, receive alerts when staff arrive or leave the office or other set locations, and set up network chats. • For example, Oregon home visitors worked with their supervisor to revise the safety protocol for home visits (e.g., texting supervisor to confirm safe return from home visit).
	Provide support and communication for staff on setting clear boundaries and expectations with program	PD3.SD1.C2.Example 1. Contact Cards.docx	

	participants (re: availability outside normal business hours)		
	Offer discrete and non-threatening mechanism for staff to report events that may cause physical or psychological harm	PD3.SD1.C3.Example 1. HR Meeting.docx	
	Create well-balanced, reasonably sized caseloads	PD3.SD1.C4. Example 1. Assessment due dates .docx	
	Schedule protected time for scheduling visits, data entry	PD3.SD1.C5. Example 1. Protected time for charting.docx PD3.SD1.C5.Example 2. Balanced workloads.docx	
When assessing and developing policies & procedures	Write clear and transparent policies and communication around personal time off and flex time for hours worked outside of typical workday (e.g., family leave)	PD3.SD2.C1.Example 1. Flex Time.docx	<ul style="list-style-type: none"> • The HRSA resource, Infusing Cultural and Linguistic Competence into the Recruitment and Retention of Home Visitors, can be used by MIECHV awardees and LIAs to assess their organization based on the national CLAS (culturally and linguistically appropriate services) standards and develop an action plan. • This tip sheet describes ten actions your agency or organization can take to promote cultural competence. • This brief from the National Home Visiting Resource Center summarizes research to answer questions such as What factors contribute to home visitors' mental health and well-being? and How can home visiting programs reduce stressors and support home visitors?
	Organizational assessment of cultural / linguistic competence	PD3.SD2.C2.Example 1. Cultural Competence in Reflective Supervision.docx	
	Create workplace policies or benefits that support physical and psychological well-being and safety including during pandemics and other disasters	PD3.SD2.C3.Example 1. Pandemic and Disaster Policy.docx	

For or during administrative time	Provide access to routine infant early childhood mental health consultation and Employee Assistance Program	PD3.SD3.C1.Example 1. Access to mental health support.docx	<ul style="list-style-type: none"> EAMHC 5,4,3,2,1 poster The National Center for Cultural Competence has created an organizational self-assessment tool for use by family-serving agencies. An accompanying guide supports organizations with moving from assessment to action. Utilize the Courageous Conversations model to facilitate team reflection and discussion.
	Incorporate culturally relevant staff wellness and mindfulness techniques into team meetings, daily routines, and workflow	PD3.SD3.C2. Example 1. Giving space for HV next steps .docx PD3.SD3.C2. Example 2. Mindfulness activities during reflective supervision.docx PD3.SD3.C2. Example 3. Mindfulness activities during team meetings .docx	
	Incorporate process for engaging in supportive and courageous conversations around racism, oppression, & equity	PD3.SD3.C3.Example 1. Courageous Conversations.docx	

PD4: Teamwork and Communication

Secondary Driver (SD)	Change Ideas (for LIAs)	PDSA Examples	Resources

Recognition and celebration	Develop formal and informal staff recognition processes that incorporate individual preferences for forms of recognition	PD4.SD1.C1. Example 1. Preferences for recognition.docx	<ul style="list-style-type: none"> • Pebbles, or the things that “get in the way of a good day,” can be surfaced using the techniques described in the “What Matters to You?” Conversation Guide (Appendix A of the IHI Framework for Improving Joy in Work). • Virtual or physical “shout-out” board or appreciation tree where coworkers can recognize the contributions and accomplishments of others
	Use huddles, debriefs, and team activities to reflect on and celebrate team successes	PD4.SD1.C2. Example 1. “You Rock”.docx PD4.SD1.C2.Example 2. Celebrating success .docx	
When developing plans for career path advancement	Develop task force with home visiting program staff and relevant organization and awardee leadership to build buy in and engage in strategic planning on incentives, career pathways, and living wage	PD4.SD2.C1.Example 1. Early Childhood Task Force.docx	<ul style="list-style-type: none"> • Consider benefits and reimbursement policies when assessing inequities (e.g., the Home Visiting Career Trajectories Study found variability in insurance premiums across home visiting programs, and 50% of home visitors reported that reimbursement provided for traveling to home visits was insufficient). • Provide tuition reimbursement / scholarship dollars for home visitors who wish to advance their education while remaining in the job.
	Partner with agency and awardee leadership to build buy in, develop, and implement plan for home visiting career pathways	PD4.SD2.C2.Example 1. PD Reimbursement.docx	
	Develop Lead and Senior home visitor positions for those who stay in the job	PD4.SD2.C3.Example 1. HV Trainers.docx	
	Partner with agency and awardee leadership to build buy in, develop, and implement plan to conduct internal / state / regional	PD4.SD2.C4.Example 1. Pay Study.docx	

	audit to assess and respond to pay inequities		
During staff meetings	Incorporate team building activities to build trust and familiarity between co-workers	PD4.SD3.C1.Example 1. "If" icebreaker .docx PD4.SD3.C1.Example 2. Physical ice breakers.docx	<ul style="list-style-type: none"> • Gallup Employee Engagement Survey • Goodwill Gulf Coast "What If" icebreaker • High 5 Test- A strengths assessment tool designed to understand each team member's strengths and apply a strength-based approach to career growth. • Maximizing team and Peer Networks to Improve Family Outcomes Module
	Use strength-finder and / or leadership style resources to identify individual and collective strengths, particularly at times of change	PD4.SD3.C2. Example 1. Presenting insights.docx PD4.SD3.C2.Example 2. Strength Finders.docx	
	Use regularly scheduled staff social events or shared meals to promote team building	PD4.SD3.C3.Example 1. Staff picnic.docx	
Developing relationships and shared decision making between leadership and staff	Train leadership staff in participative management, team building, and consensus decision-making	PD4.SD4.C1.Example 1. Collaborative Agenda Setting.docx	<ul style="list-style-type: none"> • Adapted from the Institute for Healthcare Improvement's Change Ideas for Improving Joy in Work. Supports leaders to grow their understanding of the daily work lives of program staff and experience the work through their eyes. • HRSA's Leadership Matters guide introduces leadership competencies for those in the maternal child health field, including communication, team building, negotiation and conflict resolution. • Participative management principles recommend that leaders 1) involve others early on and prior to implementing changes; 2) keep staff informed of future changes that may impact them; and 3) encourage sharing and listen to others at all levels of the organization (Perlo et al., 2017).
	Leaders intentionally spend time connecting to the work of the home visiting program (e.g., attending parent group, shadowing HV)	PD4.SD4.C2. Example 1. Parent Group.docx	

Cheat Sheet: The Measurement System

SMART AIM:

- 85% of home visiting staff report they always feel supported to manage their work and still be present for the families or staff they support.

PROCESS AIMS:

- Less than 90 days between when a position is posted and when it is filled.
- 95% of home visiting staff are trained in cultural competence, implicit bias, trauma-informed practice, courageous conversations on equity and oppression, and psychological safety.
- 90% of home visiting staff report they always receive reflective supervision that plays a role in motivating them in their work.
- 90% of reflective practices are always implemented by home visiting supervisors.
- 85% of indicators of staff wellness (work/life balance, stress management, and self-care) always occur for home visiting staff.
- 90% of indicators of positive workplace climate (recognition, respect, and teamwork) always occur for home visiting staff.

MEASURES:

Measure #1 (Primary Driver 1): Time between when a position is posted and when it is filled

- For each home visiting position filled during the reporting month, a count of the total number of days between when that position was posted and when it was filled
- Survey item [Data Manager only]:
 - For each home visiting position filled last month, how many days were there from the time the position was posted to when it was filled?

Measure #2 (Primary Driver 2): % of home visiting staff trained in cultural competence, implicit bias, trauma-informed practice, courageous conversations on equity and oppression, and psychological safety

- Numerator: Number of home visiting staff who have completed training in cultural competence, implicit bias, trauma-informed practice, courageous conversations on equity and oppression, and psychological safety
- Denominator: Number of home visiting staff in reporting month
- Survey items [Data Manager only]:
 - How many staff members do you have in your home visiting program?
 - How many home visiting staff members have been trained in cultural competence, implicit bias, trauma-informed practice, courageous conversations on equity and oppression, and psychological safety?

Measure #3 (Primary Driver 2): % of home visiting staff reporting they always receive reflective supervision that plays a role in motivating them in their work

- Numerator: Total number of “always” responses to the relevant survey item
- Denominator: Total number of responses to the relevant survey item, excluding “N/A”
- Survey Item [All staff]:
 - I received reflective supervision that played a role in motivating me in my work.

- Never, rarely, occasionally, often, or always

Measure #4 (Primary Driver 2): % of reflective practices that home visiting supervisors report they always have the ability to implement

- Numerator: Total number of “always” responses to the relevant survey items
- Denominator: Total number of responses to the relevant survey items, excluding “N/A”
- Survey Items [Staff providing reflective supervision in the last two weeks]:
 - I had the ability to properly prepare.
 - Never, rarely, occasionally, often, or always
 - I had the ability to greet my supervisee(s).
 - Never, rarely, occasionally, often, or always
 - I had the ability to invite supervisee(s) to help set priorities for our time together.
 - Never, rarely, occasionally, often, or always
 - I had the ability to invite dialogue to allow my supervisee(s) to share their story.
 - Never, rarely, occasionally, often, or always
 - I had the ability to seek to understand my supervisees’ perspectives by summarizing with concrete observations.
 - Never, rarely, occasionally, often, or always
 - I had the ability to engage with supervisee(s) throughout the entire session.
 - Never, rarely, occasionally, often, or always
 - I had the ability to work with supervisee(s) to develop concrete next steps.
 - Never, rarely, occasionally, often, or always

Measure #5 (Primary Driver 3): % of indicators of staff wellness (work/life balance, stress management, and self-care) that home visiting staff report always occur

- Numerator: Total number of “always” responses to the relevant survey items
- Denominator: Total number of responses to the relevant survey items, excluding “N/A”
- Survey Items [All staff]:
 - I felt satisfied with my work/life balance.
 - Never, rarely, occasionally, often, or always
 - I was able to manage the stress associated with my job.
 - Never, rarely, occasionally, often, or always
 - I had an opportunity to engage in self-care.
 - Never, rarely, occasionally, often, or always

Measure #6 (Primary Driver 4): % of indicators of positive workplace climate (recognition, respect, and teamwork) that home visiting staff report always occur

- Numerator: Total number of “always” responses to the relevant survey items
- Denominator: Total number of responses to the relevant survey items, excluding “N/A”
- Survey Items [All staff]:
 - I felt like I was part of a team working towards something meaningful.
 - Never, rarely, occasionally, often, or always
 - My leader(s) showed that they knew about the work that I do.
 - Never, rarely, occasionally, often, or always
 - My leader(s) showed that they care about the work that I do.

- Never, rarely, occasionally, often, or always
- My leader(s) acknowledged me for what I do.
 - Never, rarely, occasionally, often, or always
- My colleague(s) acknowledged me for what I do.
 - Never, rarely, occasionally, often, or always
- We celebrate success within our team.
 - Never, rarely, occasionally, often, or always

Measure #7 (SMART Aim): % of home visiting staff reporting they always feel supported to manage their work and still be present for the families or the staff they support

- Numerator: Total number of “always” responses to the relevant survey items
- Denominator: Total number of responses to the relevant survey items, excluding “N/A”
- Survey Items [All Staff]:
 - I felt supported to manage my work and still be present for the families I serve.
 - Never, rarely, occasionally, often, or always
 - I felt supported to manage my work and still be present for the staff I support.
 - Never, rarely, occasionally, often, or always

Additional Run Chart for Dashboard: % of home visiting staff responding to the survey

- Numerator: Number of surveys completed in the reporting period
- Denominator: Total number of home visiting staff from most recent survey

For support on how to use these resources, contact us at HVCoin@edc.org

Acknowledgements

This document was prepared for the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), by Education Development Center, Inc., under grant number UF4MC26525-09-00, Home Visiting Collaborative Improvement and Innovation Network 3.0 (HV CoIIN 3.0). The information, content, and conclusions herein are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by, HRSA, HHS, or the U.S. government.