



Scaling Solutions in Staff Recruitment and Retention

BECOME A CHANGE CHAMPION! JOIN THE MOVEMENT TO TRANSFORM HOME VISITING SYSTEMS!

What will we do?

Embark on an exciting 10-month journey with Education Development Center (EDC) as we lead a Collaborative Improvement and Innovation Network (CollIN) dedicated to scaling best practices for improving the recruitment, hiring, and professional well-being of home visiting staff.

Shared Aim: By April 2027, 85% of home visiting staff feel supported to manage their work and still be present for the families or staff they support.

What is a CollIN?

A CollIN is your entry to collaboration, innovation, and improvement. It brings together MIECHV awardees and local implementing agencies (LIAs) around a shared mission, empowering teams with:

- **Expert coaching and support** from seasoned improvement advisors.
- **Proven tools and strategies** to bridge system gaps with speed and impact.
- A dynamic, peer-driven network to **share, learn, and grow together**.

This **free, voluntary improvement initiative** offers everything you need to tackle challenges, build capacity, and create connections to other home visiting programs.

Why join now?

Participation will support your awardee team to:

- **Build CQI expertise** through hands-on guidance in launching improvement teams, analyzing program data, and coaching LIAs to adapt and test change ideas through Plan-Do-Study-Act cycles.
- **Connect with awardee peers** in a CQI Lead Community of Practice to share insights, successes, and solutions.

“We were able to fill two long-standing key vacancies. The genuine inclusion of the program staff in the recruiting and hiring process had a direct impact on our ability to fill these key roles. We were able to step out of the routine way of trying to fill vacancies, and this led to opportunities for interaction with potential team members that we might have overlooked in the past.”
Staff Recruitment & Retention CollIN Participant

- **Scale powerful, proven interventions** that streamline efforts and maximize impact.
- **Achieve MIECHV CQI Plan goals** with multiple LIAs.
- **Gain confidence** in implementing evidence-based practices that lead to sustained, breakthrough change.

Who can apply?

- MIECHV awardees and LIAs interested in trying proven solutions endorsed by other home visiting programs to improve staff recruitment and retention.
- Teams of all experience levels, whether new to CQI or seasoned in improvement work.
- Applications must be submitted by a MIECHV awardee.

Timeline:

- **December 2, 2025:** Attend the application webinar to learn more (3:00-4:00 PM EST). [Click here to register!](#)
- **January 9, 2026:** Application deadline—[apply in just 15 minutes!](#)
- **February 2026:** Application decisions sent
- **May 2026:** Awardee CQI Lead Community of Practice begins
- **June 2026:** LIA Orientation

“This experience has played a crucial role in fostering a stronger sense of closeness within our team and cultivating a more supportive work environment.”
Staff Recruitment & Retention CoIIN Participant

Events Schedule:

- Awardee Community of Practice Calls – First Wednesday of each month from 2-3:30pm ET (May 2026 – June 2027). Exceptions: No calls in August 2026 & January 2027 (due to Learning Sessions).
- LIA Orientation Call – Tuesday, June 16, 2026, 2-3:30pm ET
- Learning Session 1 (Virtual) - August 4, 5, & 6, 2026 (1-4pm ET)
- Learning Session 2 (Virtual) - January 25, 26, & 27, 2027 (1-4pm ET)
- Action Period Calls – Third Wednesday of each month from 2-3:30pm ET (September 2026 – April 2027). Exceptions: No call in January 2027 (due to Learning Session).
- Harvest & Celebration (Virtual) - Wednesday, May 20, 2027, 2-3:30pm ET

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