



Supporting Families Right from The Start

CENTRAL ADMINISTRATION POLICY MANUAL

(ALSO REFERRED TO AS THE

NYS MULTI-SITE CENTRAL ADMINISTRATION POLICY MANUAL)

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**Office of Children
and Family Services**



**Prevent Child Abuse
New York**



**CENTER FOR HUMAN SERVICES RESEARCH
UNIVERSITY AT ALBANY** State University of New York



**Healthy Families
America**

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INTRODUCTION

Healthy Families New York Statement of Purpose (Mission)

The mission of Healthy Families New York (HFNY) is to improve child and family outcomes for the state's at-risk families by providing supportive home visiting to new and expectant families.

Program Goals

- Support parent child bonding and relationships
- Promote optimal child and family health, development, and safety
- Enhance parental self-sufficiency
- Prevent child abuse and neglect

Healthy Families New York Approach

Healthy Families New York (HFNY) is committed to relationship-based practice and recognizes the significance of the Parallel Process. Through our relationships – with families, within our program system, and in our communities – we work to decrease risk to children and families and build Protective Factors. These most basic philosophical and practical concepts underlie all HFNY training, assessment, home visiting, ongoing support and supervision, internal and external quality assurance, and program administration.

The relationship-based approach informs all the policies and procedures described in this manual. Adherence to these policies and procedures promotes fidelity to the Healthy Families America (HFA) model, which has its foundation in 12 Critical Elements (Appendix A).

HEALTHY FAMILIES NEW YORK CENTRAL ADMINISTRATION PARTNERS

The Healthy Families New York Central Administration Team is comprised of three partners:

- New York State Office of Children and Family Services (OCFS)
- Prevent Child Abuse New York (PCANY)
- Center for Human Services Research (CHSR)

New York State Office of Children and Family Services

The New York State Office of Children and Family Services funds, manages, and coordinates Healthy Families New York. The New York State Office of Children and Family Services contracts with all funded programs to provide Healthy Families services. The New York State Office of Children and Family Services PCM's monitor program performance on Best Practice Standards, Performance Targets, and Performance Indicators, conduct annual site visits to assess program and contractual compliance with requirements, and provide Quality Assurance and Technical Assistance to programs. The New York State Office of Children and Family Services is also responsible for the design, planning, implementation, and oversight of HFNY research, evaluation, and continuous quality improvement activities. The New York State Office of Children and Family Services research staff conduct many of the analyses required by the HFA Best Practice Standards and other evaluation studies of interest to NYS. OCFS research staff also provide technical assistance to the multi-site system to support data management, analysis, and interpretation activities.

Prevent Child Abuse New York

Prevent Child Abuse New York is responsible for training HFNY staff (core training, topic specific, etc.) and ongoing staff development. In addition, PCANY makes a Quality Assurance site visit to each program annually. Quality Assurance includes a focus on building skills in HFA's required elements of supervision: administrative, clinical, and reflective. QA observations of practice alternate each year between the Family Resource Specialist (FRS) and Family Support Specialist (FSS) Supervisor roles. The QA includes a review of documentation. This documentation review supports supervisors in ongoing professional development and includes but is not limited to supervisor notes, and FROG narratives. PCANY also provides activities such as role specific forums and in-services, and a technical assistance component is also provided to sites. Prevent Child Abuse New York has a Director of Training, an Associate Director, a Senior Training and Staff Development Specialist, a Program Associate, and several Training and Staff Development Specialists including HFA certified trainers.

Center for Human Service Research

The Center for Human Service Research is responsible for the development and maintenance of the Management Information System (MIS) which produces automated reports available to sites and state managers for performance monitoring. The Center for Human Service Research provides MIS training and support to users, assists with data collection, and runs the Performance Indicator reports twice per year to measure model fidelity. They also provide technical assistance around data management, analysis, and interpretation. In addition, CHSR staff engage in program evaluation activities by generating evaluation topics/questions, collecting data, conducting analyses, and disseminating results to the entire multisite system.

The Central Administration team provides the statewide system with:

- Implementation support to new and developing programs
- Data collection and analysis
- Staff training and professional development opportunities
- Information and networking opportunities
- Assistance with Healthy Families America (HFA) accreditation
- Access to educational resources
- Quality Assurance (QA)
- Technical Assistance (TA)
- Evaluation and Continuous Quality Improvement (CQI)
- Policy Development

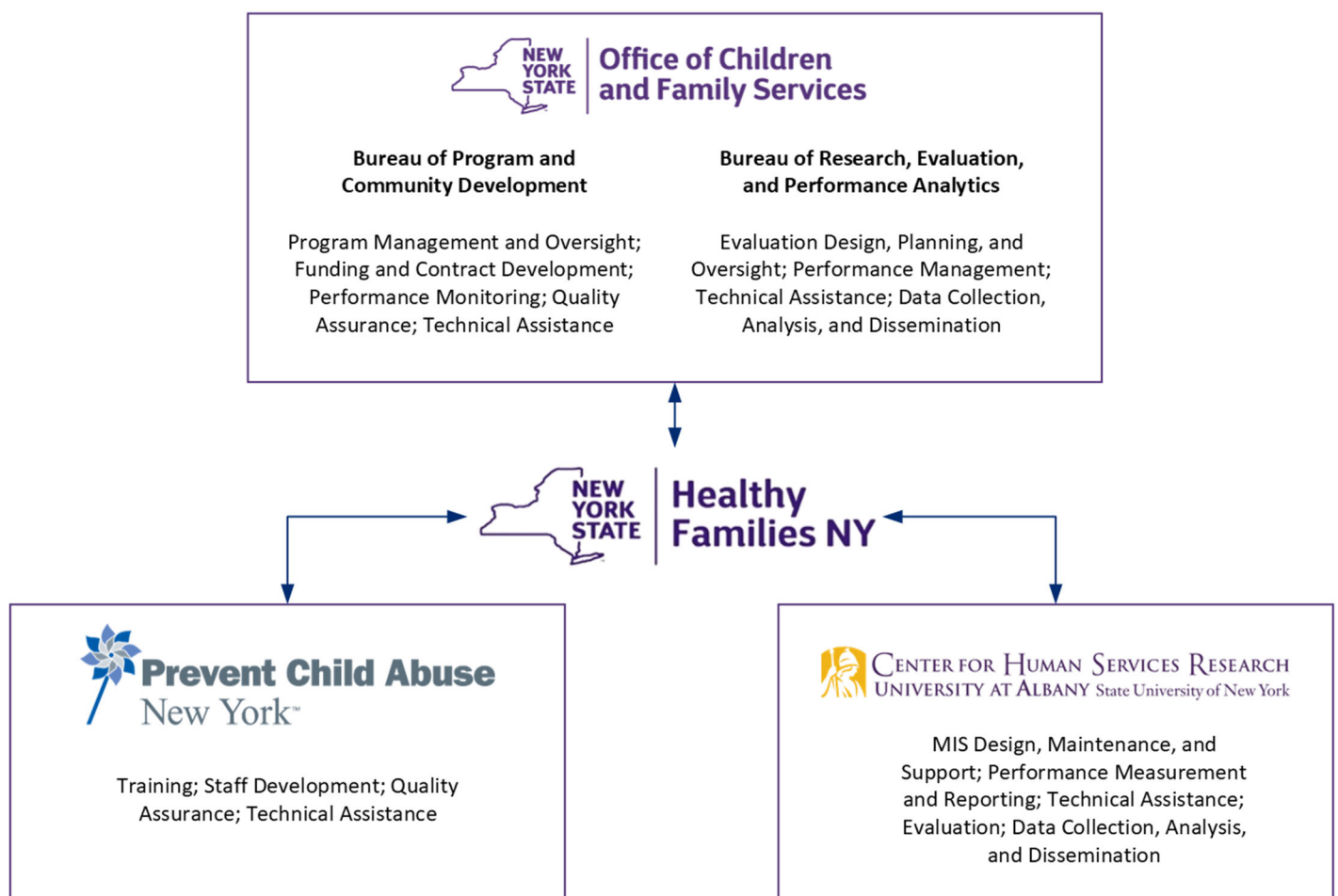


Figure 1. Central Administration Partners

HEALTHY FAMILIES NEW YORK INFORMATION-SHARING OPPORTUNITIES

HFNY engages in a continuous communication cycle and has multiple ongoing opportunities for sharing information to and from sites and for receiving feedback from all CA partners and sites. Below is a description of some of our formalized opportunities. A number of additional opportunities exist, resulting in numerous touchpoints with all of our HFNY sites.

Central Administration Meetings

Central Administration meetings occur on a bi-monthly basis and are scheduled a month prior to system-wide meetings (Regional or Statewide Leaderships) to allow for planning of these aforementioned meetings. Should the need arise, CA will meet more frequently than bi-monthly. The structured agenda for the CA meeting always includes opportunities to discuss all six of the functional areas. These meetings provide the springboard to identify opportunities for functional change based on CA partners' interactions with site staff and review of data.

These are a few of the processes that are discussed during meetings and allow CA to identify functional change:

- 1) Feedback from site staff during QA or TA visits
- 2) Questions/concerns that may arise during trainings or professional development provided by HFNY
- 3) Review of Performance Indicators and Targets
- 4) Debriefing about Regional and Statewide Leadership meetings
- 5) Changes in HFA BPS, New York State contractual requirements or Social Service law, funding expectations, federal requirements
- 6) Program grievances
- 7) Debriefing forum discussions
- 8) Evaluation findings

Statewide Leadership Meetings

Statewide leadership meetings consisting of all program managers and the members of CA occur at least two times a year. The agenda at these meetings covers the six functional areas and incorporates input from Program Managers. The goals of these meetings include sharing resources and information, and discussing and making decisions concerning training, multi-site policies, evaluation, technical assistance, quality assurance, and administration. They are also used to share ideas, successes, and concerns as well as provide technical assistance to PMs in any of the functional areas.

Statewide Regional Meetings

At least four times a year (sometimes more in certain regions) program managers and regional representatives from CA also meet. These meetings serve a similar function as the larger meetings and cover the six functional areas but can address more regional concerns in a smaller group setting. Programs are invited to submit agenda items for these meetings. These meetings occur in regions throughout the State and meeting minutes are distributed. Regions are divided as follows: Western region, Syracuse region, Capital region, Mid-Hudson region, NYC/Metropolitan region.

HFNY Website

The HFNY website is utilized to share information, resources, tools, training materials, policies and procedures, the training calendar and materials, and Best Practice Standards for all HFNY programs. In addition, the website holds role specific information for all NYS HFNY site staff. The website is regularly reviewed and updated as needed. A website committee of all 3 branches of CA oversees this work.

HFNY System Changes Support

Webinars, calls, and office hours are conducted when new materials are being rolled out to discuss best practice and consistency as well as concerns or confusion in using these materials. CA also maintains a shared system calendar for all meetings, webinars, trainings, events, etc.

POLICIES AND PROCEDURES

The Central Administration (CA) has established a set of policies which detail the functioning of the CA and guide site operations across the multi-site system.

P-1. The Central Administration has policies and procedures which guide site operations and implementation of the HFA Best Practice Standards at the local level

CENTRAL ADMINISTRATION CONTRACTUAL REQUIREMENTS POLICIES

P-1.1

POLICY: The Central Administration has established and maintains written CA policies governing contractual requirements and operations at the site level. These policies include how sites within the multi-site system operationalize the standards identified in the HFA Best Practice Standards, and the process for making changes to the policy manual, including the timeframe for communicating changes to local sites.

HFNY sites are funded by the New York State Office of Children and Family Services (OCFS). Sites are selected through a competitive Request for Proposal (RFP) process, through which proposals are solicited from agencies serving historically underfunded communities. Programs are funded based on the strength of their proposal, their ability to document community need, and their ability to document strong community collaborations. Funded programs are required to follow the Healthy Families America Best Practice Standards and participate in evaluation activities as well as the accreditation process. For sites that are approved through HFA and CA to implement the HFA Child Welfare Protocol (CWP), contract requirements include but are not limited to a signed Memorandum of Agreement (MoA) between the local HFNY site and the local child welfare agency. The MoA outlines the expectations of the relationship and services being provided to families, voluntary nature of the program, advanced supervisory support etc. All requirements are detailed in every contract between OCFS and Healthy Families sites.

Guidelines

1. All OCFS funded sites must submit a HFNY Work Plan as needed. The Work Plan must outline the number of families to be enrolled and served each year and should include the following information:
 - Organizational Experience
 - Description of the Target Population and Area
 - Project Staff
 - Project Activities/Services provided and how they contribute to the outcomes
 - Outreach and Enrollment Plan to achieve the contracted number of assessments and families to be served
 - Quality Assurance and Continuous Quality Improvement Plans to achieve and maintain performance targets and performance indicators
 - Partners/Referral Relationships
2. All OCFS funded sites must become affiliated with HFA as part of the multi-site system and adhere to the HFA Best Practice Standards (BPS) and contractual program requirements (see Appendices A – 12 Critical Elements and GA Standards; B – Performance Targets; and C - Performance Indicators):
 - Adherence with the HFA Best Practice Standards (Contact HFA for the most up-to-date version of the Best Practice Standards) for providing quality home visiting services and following policies as established in the Healthy Families New York Site-Specific Policy and Procedures Manual
 - Provision of home visiting services in a specified target area

- Coordination with local health and social service departments; and other community service providers to support families in receiving needed services
 - Adherence with prescribed performance targets (see Appendix B)
 - Adherence with prescribed performance indicators (see Appendix C)
 - Participation in bi-monthly State and/or Regional Leadership Meetings
 - Participation in the home visiting Management Information System (MIS) within established time frames and ongoing evaluation conducted by OCFS with CHSR
 - Participation in and completion of all required core, wrap-around and advanced training within specified time frames as set forth in the HFA BPS
 - Agreement to be affiliated and accredited by HFA
 - Additionally, all contractors with subcontracts will provide oversight that at minimum includes review of all program and fiscal reports and claims on a quarterly basis. On-site reviews will be conducted at a minimum on an annual basis
3. Other contractual requirements that assist in operationalizing New York State and HFA best practice standards include submitting Quarterly Reports and Annual Service Reports (ASRs) with all required analyses, program updates, and strategic planning. Quarterly Reports are due no later than 30 days from the end of the quarter, while Final Annual Service Reports are due no later than 30 days after the end of each contract period (See Appendix D for the HFNY Quarterly Report Guidelines and Template and Appendix E for the HFNY ASR and Equity Plan Guidelines and Template).

HFNY SITE-SPECIFIC POLICY AND PROCEDURES DEVELOPMENT AND REVISION

P-1.2

POLICY: The HFNY site-specific system policies and procedures related to site operation are developed and revised/refined in part with input from sites within the system, and as a result of feedback and changes from all CA functional areas (policy, training, quality assurance, technical assistance, evaluation, and administration) including:

1. HFA changes to BPS
2. Site feedback from annual QA site visits
3. Identified needs from other QA activities, such as: quarterly reports, annual service reviews, annual site visit interviews
4. Feedback from existing committees/workgroups (i.e., Policy, QA/TA, Curriculum, Fatherhood, Child Welfare Protocol, REaCH, etc.)
5. Feedback from PMs at quarterly regional meetings or bi-annual statewide leadership meetings
6. Feedback from training evaluations
7. Changes in NYS contract requirements
8. Identification of system-wide technical assistance needs
9. Recommendations from research and evaluation activities
10. Recommendations from the Training Analysis and Plan, TA Analysis and Plan, QA Analysis and Plan, Evaluation Plan, and Equity Plan.

Guidelines

Procedures for HFNY Site Specific Policy and Procedures Manual Development:

1. The HFNY Site-Specific Policy and Procedures Manual is developed by a committee of members from each branch of CA.
2. At the time of policy development, the committee meets regularly to collaboratively draft the new policy.
3. Once the committee has completed a policy it is sent to all CA members and site Program Managers for feedback.
4. Site Program Managers are encouraged to share draft policies with their supervisors and direct service staff for feedback, including reflections on how policy may impact practice
5. CA members and site Program Managers have approximately two weeks to provide feedback on the draft policy. Some policies may require more time to review.
6. CA members and site Program Managers are encouraged to provide all feedback on the HFNY Site-Specific Policy and Procedures Manual using the HFNY Site Specific Policy and Procedure via a shared virtual drive. This feedback is reviewed by the Policy Committee.
7. Any feedback requiring CA input is then discussed at our bi-monthly CA meetings as needed. The Committee meets and revises all policies and distributes the final HFNY Site-Specific Policy Manual electronically.
8. Each program is then tasked to insert their site-specific procedures into every finalized policy.
9. Site-specific procedures are due back to the OCFS Program Contract Manager (PCM) within four weeks of the finalized policy being released.
10. HFNY Site-Specific Policy and Procedures Manuals are submitted to the OCFS PCM for review and approval. In the event that the policy manual is not submitted, the Executive Director of the HFNY program site will be notified. That site will then have 30 days to

submit a program improvement plan detailing the agency's plans to complete and submit their HFNY Site-Specific Policy Manual to the OCFS PCM, with the deadline individualized to the scope of work to be completed.

11. The HFNY Site-Specific Policy and Procedures Manual is posted on the HFNY website for reference. Program Managers are required to review with and share all final Policy and Procedure manuals with existing staff, and all new staff are to be oriented to these manuals during the onboarding process.

Procedures for HFNY Site Specific Policy and Procedures Manual Revisions:

1. HFNY Site-Specific Policy and Procedures revisions will be an ongoing agenda item at both Regional Meetings with sites and CA meetings with all CA partners.
2. When an area of policy is identified as needing revisions due to discussions in any of HFNY workgroups, committees, meetings or any other means of communication, the information and feedback will be brought to the policy committee for discussion and consideration.
3. Whenever applicable, any concerns identified in any policy that cannot be addressed by the policy committee will then be brought to the subsequent CA meeting for discussion. Central Administration will make the final decision regarding any policy change.
4. The policy committee will then update the policy and circulate it for feedback from CA partners and sites.
5. Site Program Managers are encouraged to share policies with site staff for input, particularly reflections on how policy change may impact day-to-day practice.
6. CA members and site Program Managers will provide feedback using the HFNY Site Specific Policy and Procedure Manual shared virtual drive within two weeks of the policy change release.
7. The policy will be finalized by the policy committee and incorporated as part of the HFNY Site-Specific Policy and Procedures Manual.
8. If the policy change results in site-specific procedure change, then sites submit their changes to the OCFS PCM on the due date requested (typically within four weeks of the finalized policy being released) via electronic distribution.
9. Any additional changes to the policy manual procedures by the site will also be shared at the annual site visit with PCM.
10. All site-specific procedure revisions will be reviewed, and feedback will be provided by the OCFS PCM. If questions arise, feedback will be solicited from CA via conference or at the subsequent CA meeting.
11. All Program Managers attend a Program Manager Orientation that orients them to the procedures surrounding policy manual development.
12. Newly affiliated sites will have one year to develop and submit a policy manual with assistance from their PCMs and other TA partners.

COMMUNICATION REGARDING POLICY CHANGES

P-1.3

POLICY: The Central Administration communicates, clarifies, and updates the sites regarding any changes to policies and procedures regarding guidance on the implementation of the HFA Best Practice Standards in a timely manner.

Guidelines

1. When a new edition of HFA Best Practice Standards is released, HFNY CA will send the new edition to all sites and CA members for review. The document will be shared electronically in a timely manner electronically.
2. CA will then task the Policy committee to begin reviewing changes to the HFNY Site Specific Policy and Procedures Manual and the policy development process described above will resume (see P-1.2)
3. HFNY has adopted a continuous feedback loop regarding the development and revision of policies. Draft policies are shared for system-wide feedback. All CA members and sites have approximately two weeks to provide feedback. Some policies may require more time.
4. All HFNY Program Managers are strongly encouraged to review drafts of site-specific policies with staff and incorporate staff feedback into the site's submission to CA, with particular attention to the impact policy changes may have on practice.
5. Once feedback from both CA partners and sites is incorporated, the policy committee will finalize the policy for CA approval.
6. Once approved, the finalized policy will be shared with all sites and CA members via email within 30 days. The finalized policies will also be available on the password-protected side of the HFNY website.
7. Sites will then be required to finalize their procedures as detailed in P-1.2.
8. Central Administration will also provide guidance to sites on a 1:1 and system-wide basis via conference calls, e-mails, webinars, preparation of guidance documents, Q&A opportunities during Regional and Statewide Leadership Meetings, and TA visits with CA partners regarding policy implementation and procedure development.
9. Site visit, and Quality Assurance visit tools will be updated to incorporate new editions of the HFA Best Practice Standards and any HFNY policy changes.
10. The Management Information System (MIS) will also be changed to reflect any HFA BPS or HFNY policy changes as needed.

Should the implementation of new or revised policies require major changes in existing trainings/processes or the development of new ones, the QA and Training committees will develop system-wide policy implementation support plans as needed. An effort will be made to provide implementation support prior to the release of the changes when possible. This support will include clear expectations and timeframes, as well as opportunities for continuous feedback. This support will be provided via TA calls, webinars, and online forums.

P-2. The Central Administration has policies and procedures which guide and inform sites on the functioning of the CA and the interactions between the CA and the sites

DEVELOPMENT AND REVISION OF CA POLICY, PROCEDURES AND FUNCTIONAL CHANGES

P-2.1 & 2.2

POLICY: The Central Administration has established and maintains written policies and procedures governing the operation of the CA including policies related to its six functional areas of policy, training, quality assurance, technical assistance, evaluation, and administration. The Central Administration also communicates, clarifies, and updates sites regarding the policies, procedures, and functions of the multi-site system.

This policy manual was developed in partnership with representatives from each branch of HFNY CA as part of a committee. The HFNY Quality Assurance and Technical Assistance (QA/TA) committee meets on a monthly basis. If development or revisions of this manual are necessary due to the release of updated HFA BPS or some other identified need, then these changes will be prioritized by the committee. Upon finalizing these changes and getting approval from HFNY CA, this manual is shared with all sites in the HFNY system and uploaded to the password-protected side of the HFNY website.

Below are the procedures CA engages in to develop and revise policies relevant to all six functional areas. It also lists the process by which CA communicates changes to policies, procedures, and functional areas to all sites within HFNY.

Procedures

Central Administration Standards Policy and Procedure Manual Development

1. This manual was developed by the HFNY QA/TA committee. The committee is made up of members from each branch of the CA.
2. Each CA partner was tasked with revising and developing policies applicable to their role in supporting the statewide system in all six of the functional areas (policy, training, quality assurance, technical assistance, evaluation, and administration.)
3. Each partner was then tasked to review and provide feedback on all sections of the manual.
4. The committee met to incorporate all feedback and finalize a draft of the CA policy manual.
5. The draft CA policy manual was then shared with all CA members for feedback. Opportunities to discuss policies is incorporated into the bi-monthly CA meetings and discussions among CA members take place as needed.
6. The committee met to revise all policies based on feedback from all CA members.
7. After this CA policy manual was finalized, it was sent to all Site Program Managers electronically within 30 days. Site Program Managers are encouraged to share the CA Policy Manual with all staff to review and discuss the impact on staff and practice. This policy manual is posted on the password-protected side of the HFNY website for reference.

8. At any time, any concerns identified by CA or program staff with any policy in this manual will be brought to the subsequent CA meeting for discussion. Central Administration will make the final decision regarding any policy change.
9. When a new edition of the multi-site standards is released by HFA, HFNY will begin the above process from step one.

CA Policy and Procedures Manual Revisions

1. Central Administration policies and procedures revisions are an on-going agenda item, as needed, in bi-monthly CA meetings. If changes or updates are recommended by one of the partners, that partner is responsible for bringing it to the monthly QA/TA committee. Once a decision on the change has been made, that partner is also responsible for drafting a revision for the CA Policy Manual.
2. The draft of proposed changes is then reviewed by all members of the QA/TA committee and agreed upon changes will be incorporated.
3. The updated policy manual is circulated among all HFNY CA members for feedback.
4. The policy is then finalized by the QA/TA Committee and incorporated as part of the CA Policy Manual.
5. Any concerns identified in any policy by any CA partner at any time are brought to the subsequent CA meeting or QA/TA committee meeting (whichever occurs first) for discussion.
6. The final CA Policy Manual and any subsequent revisions are circulated electronically to all Program Sites within 30 days of the policy/manual being finalized. The manual and list of changes are maintained in the password protected area of the HFNY website.

Process: Communicating functional changes to HFNY

Changes within any of the six functional areas of HFNY occur within a feedback loop that involve site participation. Discussions among CA members may result in plans to develop new materials or curricula, create new partnerships, make changes to existing policies, training, creation of new forms and reports in MIS, or technical assistance processes that could address emerging needs. Furthermore, CA may want to evaluate the identified need and request more information from sites through a variety of evaluative mechanisms (e.g., surveys, interviews, focus groups, in-depth analysis of Management Information System data)

Once changes are identified and finalized, they are communicated via HFNY's formalized support mechanisms which include presentation of changes at the Statewide Leadership or Statewide Regional Meetings. Materials from these presentations are uploaded to the HFNY website.

TRAINING

P-2.3

Policy: To support programs in implementing HFA BPS to fidelity, CA has delineated a training program implemented by CA partners and provides guidance as to which trainings are the responsibility of a subcontractor and which are the responsibility of the sites.

Central Administration created a [HFNY New Hire Training Plan Checklist](#) (see Appendix F) for all HFNY programs to utilize to ensure they have a system to meet all HFA training requirements. The checklist includes all training needed by new staff within the first year of hire by area: 1) orientation and shadowing (10-2), 2) Core (10-4), 3) Screening Tools (10-6); 4) 3-6-12 month wrap-arounds (11-1,2,3), 5) annual trainings (11-4), and 6) supervisor and program manager specific training requirements within 18-months of hire (10-5).

Trainings Provided by CA Partners

Prevent Child Abuse New York (PCANY):

The Training and Staff Development team (TSD) at PCANY, offers training that meets all of the requirements for standard 10-4 of the HFA Best Practice Standards.

Role-specific core training for FRSs and FSSs is provided by HFA certified trainers who are members of the TSD team. Role-specific core training for supervisors is provided by the TSD team that also includes information on the Management Information System provided by CHSR. Program Managers attend supervisor role-specific training and also receive role-specific training from TSD in collaboration with OCFS and CHSR in the Program Manager Orientation. The CA supports programs in acquiring this training by offering it at frequent intervals and in all regions across the state. A training calendar is maintained by the TSD that lists training events and it is posted on the HFNY website. Training announcements are emailed to the state system approximately four weeks prior to the events, and share specific information including title of the training, for who it is intended, any prerequisites, directions to the training site (if applicable), and clear instructions for registering staff. Registration is maintained by TSD. PCANY provides a Training Details Memo to program managers and maintains it on the HFNY website; this document explains which trainings are the responsibility of PCANY. Every effort is made to communicate clearly and directly with programs to ensure that their needs are met, and questions answered.

In order to augment training to support on-the job application of knowledge and skills learned in Core Training, the TSD uses the following mechanisms:

- **Post Core Professional Development Forms.** Participants complete this PCANY form at the end of training by self-identifying strengths and areas for growth. The trainer adds their observations of the participant and shares resources and other activities targeted to what the participant wrote. This form is sent back to the participant's direct supervisor and PM (if not the same) and used to plan for professional development with the participant.
- **a Transfer of Learning website** specifically developed with activities and other resources to support on-the-job application of knowledge and skills acquired through Core Training for all roles. Various TOL activities are typically included as part of the trainer responses on the Post Core Professional Development Forms.

- Each role receives additional support on a variety of topics offered in forums and in-services throughout the year that further reinforce the application of knowledge and skills from Core trainings.

Center for Human Services Research (CHSR):

Supervisors and managers receive MIS (data system) training as part of HFNY Supervisor Core and Program Manager Orientation training. All other staff receive training from CHSR as webinars within the MIS. MIS users can also refer to the Healthy Families update blog found here: <https://healthyfamiliesupdates.wordpress.com/> The blog contains training videos and FAQs. Additional support is provided upon request.

Training Provided by HFNY Sites

Sites are responsible for providing orientation (10-2), wraparound (11-1, 11-2, 11-3), and ongoing (11-4) training. In addition, sites have been provided with in-house training materials developed by PCANY that satisfy 11-2.E and 11-2.F. When supervisory role specific training is not immediately available, sites may employ stop-gap training for supervisors adhering to the policies and requirements set forth in the HFNY policy manual regarding stop-gap training. Supervisors will still be required to get supervisory core training within 6-months of hire into their supervisory role. In addition, all staff, including program managers who supervise direct service staff, hired within the past five years (January 1, 2018), must receive all the training topics listed in the 11-1, 11-2 and 11-3 standards within their required timeframes. Program Managers who do not supervise direct service staff are required to complete training in 11-1.D, 11-2.G and 11-3.E.

Monitoring Adherence to Training Standard

To support programs in monitoring all BPS training requirements, the MIS provides reports which can be run independently by program managers and staff. Additionally, adherence to training requirements are monitored every 6 months as a part of the HFNY Performance Indicators and programs are notified if one of their staff has not received all required orientations and training.

QUALITY ASSURANCE (QA)

P-2.4

Policy: HFNY Central Administration has a system for providing quality assurance to each site and supports each site in assessing model fidelity and improving service quality. Well-trained staff offer an objective review and timely feedback on a routine and regular basis.

OCFS Protocols for Quality Assurance

The Annual Site Visit

The New York State Office of Children and Family Services Program Contract Managers (PCM) visit each program at least every year. Prior to each site visit, the site visit tools, and documentation requests are shared with each site program manager. In addition, OCFS PCMs call the site program manager to review each element of the tool and review all documentation to be submitted prior to the visit. Site staff are encouraged to be part of this planning process. The OCFS PCM reviews each program's utilization rates, Performance Indicators, Performance Targets, families' electronic files, electronic supervision documentation, site policies, contractual compliance as well as the program's performance and score on the tools. The PCM staff will score as much of the site visit tool as possible prior to the actual site visit in order to allot more time for discussion. Pre-site review generally includes family specific information, running of data reports, review of site's quarterly and annual service reports. Information is then incorporated into the site visit QA tool which encompasses necessary elements of the HFA Best Practice Standards (See Appendix G for current HFNY QA Site Visit tool.)

During site visits, OCFS PCMs meet with the Site Program Manager to discuss the focus of the visit. At this time, OCFS will solicit any input from the site program manager regarding any site-specific successes or challenges that they might be experiencing. After this interview, if applicable, the family files, supervision files, and any other documentation are reviewed in order to obtain more evidence of adherence to the Best Practice Standards that are being evaluated that may not be available electronically. PCMs meet with supervisors, FSSs, and FRSs in role-related groups, asking specific questions regarding their practice, understanding of policies and procedures, supervisory support, and strengths and challenges related to their site. At the conclusion of the site visit, PCMs debrief the program site staff and executive directors on the findings of the visit. Within 30 days of the visit, OCFS issues a site visit report which is shared with the site program manager, contract signatory, and CA partners. A program improvement plan (PIP) is requested for areas of concern not meeting a standard threshold such as program utilization, performance indicators and performance targets, contractual requirements, Safety and Essential Standards, and family retention. Site program managers are required to provide quarterly reports to OCFS detailing the progress on any PIP. It should be noted that if a site program manager disagrees with any of the findings in the site visit report, they may submit an explanation or additional evidence to support a change in the rating of a site visit tool or other MIS data report. Each explanation will be evaluated on a case-by-case basis and changes or modifications to the site visit report will be made accordingly. If a program manager is not satisfied with the decision, a grievance may be submitted (see P-4 for details on filing a grievance).

Following the completion of the site visit report and submission of the Program Improvement Plan, OCFS PCMs upload the site visit report, corresponding tools, and Program Improvement Plan into the OCFS HFNY SharePoint site. Site visit documentation for each HFNY program site is stored here.

Additional QA Activities

In addition to the above on-site activities, the following activities are done a minimum of once a year to monitor program quality:

- Budget Review - Includes a review of each site's personnel FTEs to determine appropriate capacity and staff ratios for supervision.
- Work Plan Review - Includes updates on the target population and services in each community.
- Quarterly Report Review - Includes a review of the following (See Appendix D):
 - Program accomplishments
 - Staff recruitment and retention
 - Training and staff development
 - QA/Management improvement activities
 - Father engagement
 - Program outreach and engagement activities
 - Tracking of capacity, utilization, and recruitment
 - Monitoring initial engagement processes and strategies to strengthen
 - Progress or barriers to reaching performance targets and indicators
 - Funding, public relations, and community systems
 - Program enrichment
 - Plans for improvement
- Annual Service Review and Equity Plan - Includes a review of components of the following Best Practice Standards (See Appendix E – as ordered in the ASR Template):
 - BPS 1 - Initiate Services Early
 - BPS 3 - Offer Services Voluntarily
 - BPS 6 - Promote PCI, Childhood Growth and Development
 - BPS 7 - Health Care and Community Resources
 - BPS 10 - Model Specific Training
 - BPS 12 - Ongoing Reflective Supervision
 - BPS 5 - Diversity, Equity, and Inclusion
 - BPS 9 - Service Providers Selection
 - BPS 10 - Model Specific Training
 - BPS 11 - Training to Fulfill Job Function
 - GA - Governance and Administration

The Quarterly Reports and Annual Service Reviews are reviewed using the corresponding tool. Feedback is shared by providing an e-mail with feedback and questions as appropriate within 30 days of receipt.

PCANY Protocols for Quality Assurance

The overarching goal of PCANY QA visits is to help sites maintain the quality of their program services and assure they are providing these services in adherence with the HFA model. Each program is assigned two QA Specialists; a home visit-focused specialist (working directly with the family support specialist supervisor) and a FROG-focused specialist (working directly with the family resource specialist supervisor). Programs receive one QA visit per year, alternating between the home visiting-focus and the FROG-focus.

Quality assurance from PCANY provides staff with support and professional development opportunities. There is a focus on skill development through support of program managers and supervisors, especially in the area of reflective work. The QA mechanisms utilized include practice observations of staff functioning in their role, competency-based written feedback sent to the program within 45 days of completing the QA visit, reflective debriefing and processing sessions, documentation review and a follow up conversation with the program manager and (if requested) supervisor about next steps and integration of the QA feedback. All of these activities offer programs valuable perspectives and insights on their practice, using the same criteria for all sites. In addition to being sent to the program manager, all QA letters are sent to the programs' Program Contract Manager at OCFS to ensure consistency and collaboration with the types of support offered to programs by the different branches of CA. Programs complete a feedback form on the entire QA process and this feedback is reviewed by PCANY for trends and themes, and adjustments are made in the QA process accordingly. All tasks related to PCANY's Quality Assurance are scheduled and tracked on a program specific spreadsheet by the PCANY team.

See most recent HFNY QA Plan for PCANY's QA Protocol for Sites.

CHSR Protocols for Quality Assurance of the Management Information System

The Management Information System (MIS) collects a continuum of data on participant involvement from the time of the initial screen through graduation or discharge from the program. Data are also collected on staff as they receive training as prescribed by the HFA model. Data entry is required contractually for programs and is integral to CA's monitoring of quality assurance. The system was designed with input from program staff at all levels. It aims to give each site the tools to monitor their own program's performance at their convenience. Information from the MIS is used by each site, at minimum, to generate quarterly reports and the Annual Service Review for OCFS and is also used to inform and help prepare OCFS, PCANY, and CHSR for site visits and quality assurance visits.

Ad hoc data tables and reports are provided by CHSR to program sites, evaluators, PCMs, and quality assurance staff as needed.

The MIS system provides statewide reports for analysis and accommodates data collection aspects that meet the MIECHV reporting requirements. The Center for Human Services Research evaluates (QA report and calls) each site's data to determine the quality of data entry in the MIS system.

TECHNICAL ASSISTANCE (TA)

P-2.5

Policy: HFNY follows HFA BPS guidelines in providing Technical Assistance (TA) to all of its sites. The CA ensures that all sites can access support in order to improve implementation of the model and the quality of services provided. CA is offered on a regular basis and prioritizes programs needing more support.

Technical Assistance around Program Implementation and Service Quality is provided by OCFS PCMs and PCANY Training Support Specialists. These TA specialists meet all of the requirements set forth by the HFA BPS.

Given the size of HFNY's multi-site system and the extent of data collection needs, HFNY also has a separate TA team that focuses on data management, analysis, and interpretation. This TA is provided by researchers at the Center for Human Services Research and OCFS' Bureau of Research, Evaluation, and Performance Analytics. Though this is an additional component of TA not specified or required by HFA's BPS, HFNY has taken the initiative to have all lead researchers complete HFA Implementation and Peer Reviewer Trainings.

HFNY Technical Assistance around Program Implementation and Service Quality

Central Administration supports best practices in the state system by providing a range of technical assistance (TA). HFNY TA is intended to be a response to a specific challenge or to provide support to a new program site or a new program manager. A TA need is identified by either CA or sites.

Mechanisms used to identify technical assistance needs in the system include:

OCFS

- All new sites receive mandatory technical assistance visits at a minimum of twice per year for the first year to address any challenges or to provide support
- Any newly hired new program managers at a site will receive TA (i.e. New Program Manager checklist and PM Needs Assessment)
- Annual site visit
- Contract development, review, and annual reporting
- File reviews
- Staff interviews
- Review of MIS reports
- Review of Quality Assurance (QA) and Technical Assistance (TA) activity reports
- Review of site level Equity Plan, QA Plan, and Continuous Quality Improvement (CQI) Plan
- Consultation with program site administration and staff
- Consultation with CHSR and PCANY
- Response to inquiries from sites

PCANY

- Systematic review of training evaluations
- Systematic review of documentation of practice observations from regular QA visits to sites, including the evaluation of the visit completed by the Program Manager and follow-up call with PM.

- Collaboration with CA partners and program administrators to identify site- specific needs
- Response to inquiry from sites
- New program managers at a site will receive TA (i.e., New Program Manager checklist and PM Needs Assessment)

Other Sources of Information

Additionally, TA needs are also identified via information shared at quarterly Regional Meetings and bi-annual Statewide Leadership Meetings. These meetings are attended by CA partners and sites' program managers. In some instances, program supervisors also attend these meetings.

Bi-monthly CA meetings typically include sharing and discussion of each partners' observations of general trends and specific circumstances that exist in program practice and management. Evaluation results are also shared. Discussions may result in plans to develop materials, curricula, community resources or partnerships, specific training or TA that will address the needs that were observed.

The Quality Assurance/ Technical Assistance (QA/TA) Committee meets monthly to review the HFA Central Administration Best Practice Standards surrounding all required Quality Assurance (QA) and Technical Assistance (TA) activities. This committee is made up of several members representing all three branches of CA. The committee has established a tracking mechanism for CA TA activities to ensure that at a minimum, CA is meeting all requirements to achieve the HFA standards. In addition to monitoring CA requirements, this committee reviews additional data to develop targeted TA for sites. Sites are asked to provide feedback on the TA they receive during the follow up call or email before TA providers close out the request.

Processes used to deliver TA to the system include:

TA for New Programs and New Program Managers

Healthy Families New York New Program Manager Orientation trainings are facilitated collaboratively by OCFS, PCANY, and CHSR, and a panel of experienced program managers. Trainees complete an Assessment of On-Going Needs which is reviewed by the CA partners and leads to individualized professional development plans that may include site-to-site mentoring from a seasoned program manager, additional training, or technical assistance.

Site Visits and Virtual Support

In addition to Orientation and Training, additional TA site visits and virtual support are conducted with each new program or expansion of a program. These visits cover a variety of topics:

- Contract and Budget Development
- Developing the Work Plan
- Management Information System (MIS)
- Target Population and Outreach
- Staff Recruitment and Qualifications
- Building Capacity/ Program Utilization
- Building Relationships with Referral Sources
- Data Management
- Performance Targets and Performance Indicators

- HFA Best Practice Standards (with specific focus on: policy development; QA (GA-2.A); CQI (GA-2.B.); Diversity, Equity and Inclusion (BPS 5))
- Any additional topics requested by HFNY system

TA Site visits to new programs occur at least twice in the first year by one or more CA partners. All the above activities are provided to existing programs as needed.

Planning for TA visits is a collaborative effort between the program site and CA partner. TA visits can result from a Program Improvement plan following a QA site visit. TA visits are followed by written documentation of the visit and next steps. These next steps could include follow-up calls or additional on-site consultation. Once the TA process for the identified concern(s) is completed, the CA partner visiting the site shares observations and documentation with the OCFS Program Contract Manager (PCM).

Most often the TA effort and follow-up plan is shared with all of CA as part of bi-monthly CA meeting agendas. In addition, CA discusses TA needs and visits in terms of site-specific and general trends, and potential implications for the state system. The OCFS PCMs may use TA activities and documentation, along with performance data and quarterly and annual reports to review and revise program contracts. The QA/TA committee reviews and identifies areas of need and trends for Technical Assistance statewide.

Systemwide TA

When CA identifies TA that would benefit the full system, Regional, Statewide Leadership and independently scheduled meetings/webinars/events are used to provide guidance and support around these needs. Systemwide TA is also used to support implementation of policy and practice changes such as shifting to one step enrollment or developing a CQI process. This systemwide TA is tracked in a separate log which documents dates TA is provided, topics discussed, and CA intended outcomes.

How TA is documented and analyzed

When a TA need is identified by a Program Manager or CA partner, a form outlining the TA need, the plan to address it, and all follow-up is completed, and details are logged into a compliance monitoring tracking document for CA members to review and analyze at least every other year. The tracking document will be reviewed during CA meetings and the QA/TA Plans will be updated accordingly.

Once a TA request is received the identified TA partner has 3 business days to acknowledge receipt and get more detailed information about the need. The identified CA partner providing TA then has two weeks to complete and share a TA plan with the program manager.

See Appendix H for the HFNY TA Process Document, Appendix I for the HFNY TA Process Flow Chart, and Appendix J for the HFNY TA Request Form. Additionally, see Appendix K for HFNY CA Technical Assistance Tracking Log. The Technical Assistance Plan will be comprehensively analyzed at least every two years and will include input from the sites' Program Managers and Supervisors.

HFNY Technical Assistance around Data Management, Analysis, and Interpretation

In addition to program implementation and service quality TA provided by OCFS and PCANY, research and evaluation specialists from CHSR and BREPA provide sites and other CA partners with data management, analysis, and interpretation support.

This type of TA is necessary given the scope of data produced by HFNY as a substantial statewide system. These efforts focus on aiding programs on how to use data to identify TA needs around program implementation and service quality. QA stresses the importance of data quality, therefore CHSR provides substantial TA around data entry processes. CA also identifies statewide concerns that result in system-wide TA, which improve the efficiency of TA provision. Finally, TA also involves the identification of external data sources that will assist programs with referral and screening processes.

CHSR TA Activities

- Receipt, review, maintenance, and analysis of program data
- Consultation and collaboration with OCFS and PCANY for identification of training needs that are revealed in the Management Information System (MIS)
- Responding directly to data management needs through coaching or additional support to sites
- Prioritization of TA to programs struggling to meet Performance Indicators
- MIS Ticketing System handles direct inquiries from sites related to the MIS. Inquiries are responded to via email, phone, or video calls
- Monthly webinars to all sites and CA are conducted to guide data entry into the MIS
- Site specific support calls are conducted to assist sites with data entry needs
- Development and maintenance of a Tableau dashboard where programs can monitor their performance indicators over past cycles and compare their performance to state averages
- Program Manager and Supervisor MIS orientation and training

BREPA TA Activities

- Developing knowledge base on processes that build CQI capacity for PCMs and sites
- Conduct comprehensive analysis of TA system
- Provide data analysis and interpretation support to PCMs on site's QA activities
- Assist CA and programs in using external data sources to better assist programs with referral and screening processes

Protection of Participant Privacy and Confidentiality

P-2.6

Policy: Central Administration ensures the protection of participant privacy and confidentiality for sharing data within and outside the system. All HFNY sites follow the site-specific and systemwide confidentiality standards included in the HFNY GA-3.A Policy. CA members also adhere to confidentiality standards related to MIS access and protection of personally-identifiable information, data, and documents; data sharing within and outside of the system; and data shared on the Healthy Families New York website or in other publicly accessible materials.

MIS Access and Protection of Personally-Identifiable Information, Data, and Documents

The HFNY Management Information System is designed and is maintained in a manner that ensures the strictest confidentiality of individually identifiable information (see MIS Security Statement).

Specifically, all CA members must:

- a. Sign an agreement to keep participant information confidential including the acceptable use of HFNY MIS upon their first use of the system (see MIS User Agreement)
- b. Keep their MIS password confidential
- c. Store personally-identifiable information, data, and documents in locked cabinets, electronically in the MIS, or in other secure (encrypted and/or password protected) computer-based filing systems
- d. Log off MIS and secure personally-identifiable information, data, and documents when not in active use
- e. Only discuss information related to specific families with other CA members, site staff, OCFS administration, funders, and HFA
- f. Refrain from using families' names (or other personally-identifiable information) in public areas
- g. Not disclose any personally identifiable information, data, or documents outside of their official duties and maintain the physical integrity of all personally identifiable information, data, and documents outside of their official duties

CA members who breach confidentiality commitments face disciplinary action up to and including dismissal.

In case of a CA member leaving their job, their supervisor must inform CHSR within 24 hours using the ticket system to remove their data access.

Data Sharing Within and Outside of the System

Central Administration members are allowed access to and use of HFNY data to conduct activities necessary to support program activities as described in their MOUs/contracts with OCFS. Any request for access or use of HFNY information or data outside of these purposes, or where the information will be made accessible to the public, or by anyone not covered under the MOUs/contracts, must be submitted to OCFS for review and approval prior to dissemination.

Requests for HFNY data or information (including HFNY MIS and RCT data, and any numbers generated from those sources) from individuals outside of the multi-site system must be submitted to OCFS for review and approval prior to dissemination.

Data Shared on the Healthy Families New York Website or in Other Publicly Accessible Materials

Central Administration members may not share personally-identifiable information, data, or documents on the Healthy Families NY website or in other publicly accessible materials. Dissemination of data or results to the public occurs through reports of aggregate data, which will not contain information that can be identifiable to individual participants.

VOLUNTARY CHOICE IN EVALUATION AND/OR RESEARCH
P-2.7

Policy: All HFNY participating families have the voluntary choice to participate in any evaluation or research activities.

All families are required to be informed of their rights as participants in any evaluation/research conducted by the HFNY state system upon enrollment in services. Families are informed that their participation in the evaluation and/or research is completely voluntary, that they can refuse to participate or withdraw at any time, and that receipt of services is not contingent upon participation in research. Families are also provided with contact information should they wish to check the information that is collected about them.

APPROVAL/DENIAL OF RESEARCH PROPOSALS

P-2.8

Policy: In order to protect the safety and privacy of families and program staff, and to ensure that the standards of effective practice are maintained, the CA has established the procedures necessary to obtain approval to conduct research with HFNY program staff or families who are currently receiving services or have received HFNY services in the past. These procedures are outlined in *HFNY Policy Manual Section GA-7.D: Research Proposals*.

Only bona fide researchers may conduct research involving past or present families served by HFNY programs. To be eligible to conduct research, the researcher must be a faculty member or graduate student at an accredited institution of higher education or hold a research position at a reputable research organization or government agency.

Procedure

1. When a site is approached to participate in a research study, the program manager should contact their OCFS PCM to discuss the study and data collection requirements. If there are questions about whether a funder is conducting research versus collecting data on program services to monitor performance or improve services as a condition of funding, this should be discussed. The OCFS PCM may request assistance from OCFS researchers as necessary to determine whether the project is a research study.
2. Programs should follow their own agency policy and procedures regarding whether they will allow bona fide researchers (other than HFNY system researchers) to engage in research activities with past or present families receiving services from HFNY programs.
3. If the agency agrees to allow the researcher to use their program for research purposes, the agency must provide the researcher with a letter of support to indicate their willingness to participate in the research study.
4. Prospective researchers must submit a proposal that meets all the requirements of the OCFS Research Proposal Application, which includes obtaining letters of support from participating programs and Institutional Review Board approval, to the OCFS HFNY Program Supervisor who will put the research proposal on the agenda for review at the next HFNY CA meeting. These meetings occur at least six times per year and include partners from OCFS, PCANY, and CHSR. Review by the full group allows multiple aspects of impact to be considered.
5. The HFNY CA will have up to 90 days to review the proposal based on the following standards: 1) relevance to the HFNY mission or contribution to the body of literature in the field; 2) methodological adequacy; 3) procedures for ensuring participant privacy, confidentiality, and voluntary choice; 4) potential risks and benefits to participants; 5) impact on HFNY or program operations; and 6) support from involved parties. The HFNY CA will also assess the extent to which the program is providing services with fidelity to the HFNY model. In order to ensure that any research results are relevant to the state system, the program in which the research will be conducted must be meeting state performance standards. Exceptions may be allowed if the research is being conducted to specifically address areas in which the program is not yet meeting standards. Researchers should be sure to address the following questions within their proposals:
 - What is the added value to families involved in the research study over and above the services provided by HFNY?
 - Can the results of the study be generalized to other HFNY programs?

6. Once HFNY CA has reviewed the research proposal, the OCFS researcher and the program's OCFS PCM will contact the researcher to address any concerns that were expressed by HFNY CA or told that their study is conditionally approved pending review by the OCFS Bureau of Research, Evaluation, and Performance Analytics (BREPA). If the researcher is unable to address all the concerns raised by HFNY CA, the study will be rejected. After all concerns are addressed to the satisfaction of HFNY CA, the HFNY Program Supervisor will provide a letter of support indicating conditional approval of the research study by HFNY.
7. Upon receipt of the letter of support from the HFNY Program Supervisor, the researcher may proceed with the OCFS Research Approval process and should submit a complete research proposal, including IRB approval to (see Appendix L for OCFS Research Approval Guidelines):

OCFS Research Proposal Review Team
Bureau of Research, Evaluation, and Performance Analytics
NYS Office of Children and Family Services
e-mail: ocfs.sm.ResearchProposal@ocfs.ny.gov

Please note in your email that this is an HFNY research proposal.

8. All research proposal materials and approvals will be maintained in OCFS BREPA HFNY CA Research Study Approval files for up to ten years after the conclusion of the research study.
9. Information on any approved study will be entered into HFNY OCFS' approved research tracking log and requests for annual updates will be scheduled and sent out accordingly.
10. HFA National Office will also be informed prior to the beginning of any approved research project.
11. HFA's research project online survey will be completed, and a summary of the research approval will be submitted, along with contact information for the Principal Investigator.
12. Healthy Families New York programs that participate in a research study will need to add a filter in the HFNY MIS for the study. This filter should be selected for each family participating in the study. The Active Enrolled Cases report in the HFNY MIS can be run with the filter selected to track participation. A copy of the research study's informed consent form should be kept in each participant's file. Participant files will be reviewed to make sure the consent form is included during the annual site visit.
13. If a participant involved in a research study at one program site transfers to a new program site, the program manager should notify their OCFS program contract manager. The participant's continued participation in the research study will be addressed on a case- by case basis via consultation between the research study principal investigator/project director, the OCFS PCM, and the OCFS HFNY researchers.
14. Any concerns about the research study (e.g., participant feedback, changes to the approved plan, etc.) should be communicated to the program's OCFS PCM within 5 business days of disclosure.
15. Annual updates and any final reports or findings should be shared with OCFS and HFNY prior to dissemination so that OCFS and HFNY may confirm that the safety and privacy of families or program staff has been protected and so that OCFS and HFNY may benefit from the research results. The same will also be provided to HFA National Office. Up to 20 business days shall be required from OCFS to review and approve draft posters, presentations, journal abstracts, and manuscripts. Researchers should also notify OCFS and HFNY in advance of any media, publicity, or other public presentation related to the research study.

BACKGROUND CHECKS

P-2.9

Policy: In compliance with HFA Safety Standard A 5.2, each CA partner conducts background and reference checks for each member of the CA within their own agency. Furthermore, all program sites are required to conduct criminal background checks on all prospective employees, interns, and volunteers in adherence to the HFNY multi-site policies and their agency's protocol.

OCFS

All OCFS employees upon hire submit to a criminal background check which includes fingerprinting as well as clearance to the New York Statewide Central Register for Child Abuse and Maltreatment.

PCANY

In addition to providing certain other information to PCANY, in the context of a prospective employee's pre-employment screening, the organization will conduct a criminal background check for each new staff hired and where applicable credit check(s) for certain roles. The prospective employee will submit information required for such checks to allow the organization to conduct the screening checks. PCANY will assume the cost for these background checks.

CHSR

Each employee at CHSR that has access to identified data of families must complete an "Employee Background Investigation Consent Form" that provides permission to the University to hire a company that conducts criminal background checks. SUNY Research Foundation conducts the background check. Each employee also conducts the CITI Program: Research, Ethics, and Compliance Training and a copy of the completed training certificate is kept on file at CHSR and renewed as needed.

P-3. The Central Administration has a policy for establishing and revoking affiliation with the multi-site system. The process can be initiated at the site or the Central Administration level

Establishing Affiliation

All OCFS funded HFNY programs in NYS must become affiliated with the multi-site system as part of their contractual agreement for funding. Affiliation requires all sites to be up to date with HFA affiliation fees and to abide by all HFA Best Practice Standards as well as HFNY Policies. In addition, each affiliated site is required to attend all Regional and Statewide Leadership Meetings, enter all data into the MIS system of record and abide by all contractual agreements including evaluations conducted by OCFS and CHSR. HFA will be notified of each newly affiliated site within 30 days of the start date of their contract.

Procedures

All programs affiliated with the multi-site system agree to the following:

- Compliance with the Healthy Families America Best Practice Standards for providing quality home visiting services and guidelines included in the Healthy Families New York Site-Specific Policy and Procedures Manual
- Provision of Home Visiting Services in a specified target area including working towards universal screening in collaboration with relevant community service providers
- Coordination with local health and social service departments
- Compliance with prescribed performance targets and indicators
- Participation in State and Regional Leadership meetings
- Participation in the home visiting Management Information System and ongoing evaluation conducted by OCFS with CHSR
- Participation in all required core, wrap-around and advanced training
- Agreement to be accredited by Healthy Families America: Upon funding, new programs are required to apply for HFA affiliation as part of the HFNY multi-site system. Programs will submit a copy of their affiliation letter with HFA to OCFS, maintain their affiliation status, and pay their affiliation fee as determined by HFA and HFNY.
- Programs agree to annual updating of affiliation and fees with Healthy Families America.
- Programs are at a minimum of 85% of their contracted capacity.

Revoking Affiliation

Revoking Affiliation may be initiated by the site or by the CA.

Healthy Families New York affiliated programs may have their affiliation revoked for the following:

- 1) If they have met both of the following conditions for a span of three years:
 - a) Sustained a poor rating on the Performance Indicators (meeting 50% or fewer) for three years
 - b) The site remained at less than 50% of capacity for three years

OR

- 2) If a site fails to comply with the policies of HFNY after being informed of noncompliance in writing and after being given a period of time, not to exceed two years, to make necessary revisions to practices or policies.

Programs having their affiliation revoked will be notified in writing and given 30 days to respond to complaints. If the program submits an acceptable corrective action plan for remedying areas of noncompliance, they will be given up to one year to correct the situation, at which time the program will be reviewed for compliance.

If the program has made acceptable progress, the affiliation will be continued. If the program does not make satisfactory progress, the affiliation may be immediately revoked.

Termination of funded programs' contracts will be handled as a separate process per the requirements specified in OCFS contracts and in collaboration with OCFS Legal department, Bureau of Contract Management, and the Commissioner of OCFS.

HFA will be notified of any revocation within 30 days.

Prior to Central Administration initiating the revocation process, the CA partners may take the following steps as appropriate:

- Central Administration staff will assist the site in the development of Program Improvement Plans to address any challenges in performance. OCFS PCMs will monitor these plans quarterly or more frequently when necessary.
- The site may receive multiple technical assistance visits by CA.
- The site may be given the opportunity to reduce their capacity or number of families contracted to serve as a remedy to improve program performance. The amount of money in the contract will also be reduced to reflect the average cost per family in the target area served as it relates to the reduced capacity and number of families the program proposes to serve after the reduction.

P-4. The Central Administration has policies indicating how sites report grievances they might have with the CA and includes an appeal process

Resolving Conflicts/Filing a Grievance

If a conflict arises between a site and one of the CA partners, or another site, the site or sites involved should follow each step below:

1. Develop a clear written statement or definition of the issue under discussion.
2. Make recommendations for the resolution of the issue
3. Send these statements to the OCFS HFNY Program Supervisor; supervisor will confirm receipt of grievance within three business days.
4. The site will have the opportunity to present the concern at the next CA meeting.
5. Central Administration will respond with an action plan in consultation with all parties involved within 90 days. The plan will include a time frame, and a provision of TA needed to assist the site in reaching goals identified in the action plan (if needed). In addition, steps will be identified to resolve the conflict. If necessary, a neutral facilitator will be identified to assist with conflict resolution.

Appeal Process

If the site disagrees with the action plan or resolution of the grievance, the site can appeal the decision made by CA by following the steps below:

1. Submit a written statement indicating that they want to appeal the decision made by CA regarding the grievance along with the statement or definition of the conflict to the Director of the Bureau of Program and Community Development at OCFS.
2. The Director will review statements gathered from all parties involved and will determine the course of action. Other departments within the OCFS will be consulted when needed. This may include OCFS Legal department I and the Associate Commissioner as appropriate.
3. The final decision will be relayed to all parties in writing.

P-5. Critical Incident Policy

Home visitors must immediately notify the Program Manager and/or supervisor in the event of a critical incident, including participant or participant's household member's death, critical injury of participant or staff, serious abuse incidents which prompt local investigation or media involvement, as well as litigation pertaining to Healthy Families work or services, threats against the program or program staff, or other critical incidents.

The OCFS PCM must be notified within 24 hours via phone or email and written OCFS Critical Incident Report submitted within 72 hours. Affected participants and staff are offered counseling when a participant death or critical incident occurs. Programs are also required to report any misuse of funds as a critical incident.

OCFS must notify the National Office promptly if any of the above critical incidents escalate to state and/or national level attention and submit the critical incident report form provided by the HFA national office. See Appendix M for the HFNY Participant Critical Incident Report and Appendix N for the HFNY Program Critical Incident Report.

The following steps are required after a critical incident occurs:

1. In the event of a critical incident, the staff that becomes the first one aware of the incident immediately informs the Program Manager and/or supervisor in accordance with site policy (GA-5A). The OCFS PCM will be notified as soon as possible by phone or email, but within a maximum of 24 hours of the program becoming aware of the incident. This notification is to include preliminary information such as the name and age of the participant and a brief description of the incident.
2. Sites will offer support to the family, including services for grief counseling or other therapeutic services, if desired by the family, and short-term transitional home visits in the case of the death of the target child.
3. Appropriate support will also be provided to the home visitor(s) and supervisor, including additional reflective supervision, and counseling or access to an Employee Assistance Program (EAP).
4. If the program staff suspect that death or critical injury of the target child or other child in the home may be the result of child abuse or neglect, staff follow the agency's procedures consistent with the child abuse reporting policy and cooperate fully with any investigation.
5. Critical Incidents are documented on the OCFS Critical Incident Report forms (see Appendices M and N).
6. If a report is made to the State Central Register concerning the death or critical injury, documentation on the OCFS Critical Incident Report includes: who made the initial report to the Statewide Central Register, if known; the contact information for the CPS worker or supervisor, if known; the notifications that followed the initial report; whether follow-up HFNY services will be provided to the remaining household members, and length of time they will be provided. Programs should refer to the GA-4A Policy for reporting of Child Abuse and Maltreatment.
7. Healthy Families New York programs funded through contracts with the New York State Office of Children and Family Services are required to report any misuse of such funding to the Office of Children and Family Services.

8. Sites will complete a preliminary written report of the critical incident, with available information, which will be made to OCFS using the OCFS Critical Incident Report within 72 hours of the program becoming aware of the incident at most. A final OCFS Critical Incident Report, with all required information included, is submitted to the OCFS PCM with updates weekly as necessary.
9. OCFS will notify the national office immediately if any of the above critical incidents escalates to state and/or national level attention and will submit the critical incident form provided by the HFA national office.