Standard 1: Initiate Services Early

**REFERRAL, SCREENING AND ENROLLMENT PROCESS** (EFFECTIVE 4/15/2025)

**HFA Best Practice Standard 1-2.A**

**POLICY: The site ensures timely determination of eligibility and offer of services.**

HFNY Policy Guidelines

* Sites develop and maintain effective referral relationships with community agencies to encourage as many screens as possible to be received as early as possible in the pregnancy or within the first two weeks of the infant’s birth. These relationships can be either formal or informal. Formal relationships are reflected in Memoranda of Agreement (MOAs) or service agreements, which must be updated and signed annually.
* Sites use the HFNY Screen Form tool to determine eligibility. A Screen is positive if received prenatally or within 3 months of birth (or within 24 months of birth for families referred directly by child welfare for Child Welfare Protocol approved programs) AND any of the following are true about the PC1 (Primary Caretaker 1):
  1. Marital status is single, separated, divorced, or widowed
  2. Late (started after the 12th week of pregnancy), no, or inconsistent prenatal care.
  3. Inadequate income (TANF or Medicaid, employed without insurance or family financial concerns)
  4. Expectant/new parent is under 21 years of age at time of screen
  5. OR if screen items a, b and c are ALL unknown.
* When programs are **approved by HFNY Central Administration (CA**) to implement the Child Welfare Protocol (CWP) the screen form will include an **additional item** to indicate that the screen in question was referred from the Child Welfare System (e.g., DSS/CWS Protective, Preventive, Foster Care), automatically resulting in a positive screen.", qualifying the family for services.
* Families with a positive screen are eligible to enroll in services.
* After receipt of referral, staff will initiate contact (attempted or actual) with family, ideally within 5 business days.
* Ideally, staff will offer services[[1]](#footnote-1) within 5 business days of initial contact (actual) with families.
* Pre-enrollment engagement activities are used to describe the program services, build the family’s interest in participation, begin to establish a relationship, and build trust (see Policy 3-2.A). These efforts are tracked in the participant case notes.
  1. The assigned worker should use their professional judgment when gauging families' genuine interest in enrolling for HFNY services, partnering with families to complete the enrollment process.
* The family is considered to be enrolled when they have agreed to services and signed the Service Agreement Family Rights and Confidentiality Form and MIS Information Consent Form. These indicate the family’s informed consent to receive services. HFNY sets the date of signatures as the family’s enrollment date.
* Referrals to community-based services, screening tools, or other services may be offered to families who are not interested in or have not yet enrolled in home visiting services.
* Screens and their outcomes are tracked by the HFNY MIS and monitored at least quarterly by the program manager, supervisor, or designated administrative staff member, and these efforts are used to develop and implement strategies for quality improvement (See Standard 1-2.B). The site, in conjunction with its community advisory board, uses this data to monitor program capacity and develop and apply strategies to fill available slots when not yet at full capacity, and, when at capacity, to reduce gaps in service availability (See Standard 1-2.C). These strategies are also reported each quarter in the Quarterly Report to OCFS.
* For sites **approved by HFNY CA** to implement CWP, procedures are in place to initiate services within 24 months of birth for families referred directly by the Child Welfare System (e.g., DSS/CWS Protective, Preventive, Foster Care). Each site approved to implement the CWP must have an MOA established with the LDSS/ACS.

**The site will adhere to all NYS policy guidelines specified above. In addition, please insert site-specific procedures that:**

1. A description of how the site will identify and maintain effective referral relationships with organizations in the community.
2. If upon receipt of screen/referral, Target Child falls outside of the required eligibility time frame (3 months of birth or within 24 months of birth for families referred directly by child welfare for Child Welfare Protocol approved programs), this family must be discussed with and approved for enrollment by the site’s OCFS program contract manager
3. Activities and expected timeframe between receipt of referral and initial contact (attempted or actual) with family (i.e. how referrals are collected, reviewed, and assigned).
4. A description of the how and when eligibility is determined.
5. Activities and expected timeframe between initial contact (actual) with family and offer of services.
6. Mechanisms to track and monitor each step of the initial engagement process, whether able to establish initial contact or not, whether services were offered or not, and the timeliness of these activities.
7. Documentation of reasons why families are not offered services.

**FIRST HOME VISIT** (EFFECTIVE 4/15/2025)

**HFA Best Practice Standard 1-3.A**

**POLICY: At least 80% of families receive a first home visit prenatally or within the first three months after the birth of the baby (i.e., up until the baby turns 3 months of age), or within 24 months for families referred from Child Welfare Local Departments of Social Services (when approved by HFNY CA to use the Child Welfare Protocol).**

HFNY Policy Guidelines

* The first home visit is the first visit which occurs after enrollment.
  + Refer to HFNY [One-Step Enrollment Process Guidelines](https://www.healthyfamiliesnewyork.org/Staff/Documents/One-Step%20Guidelines%208-10-2023.pdf)
* The first home visit occurs prenatally or within three months (calculated in the MIS as 92 days) of a baby’s birth, 80% of the time. For sites approved to implement the Child Welfare Protocol, the first home visit occurs within 24 months of a child’s birth 80% of the time (see Standard 1-3.B.).
* Enrollment may occur at or before the first home visit.
* Any instance when a family’s first planned home visit falls outside these parameters (3 months after the birth of the child or 24 months after the birth of the child if implementing Child Welfare Protocols) must be discussed with and approved by the site’s OCFS program contract manager. The program manager will document the approval in the MIS under case notes.
* Engagement efforts and families’ enrollment status are tracked in the MIS and monitored at least monthly by the program manager, supervisor, or other program designee and these efforts are used to develop strategies for quality improvement.
* Calculating the rate of families accepting services is a critical quality improvement practice (see Standard 1-4.A.); therefore, programs systematically track, measure, and analyze their data associated with family acceptance to better understand the underlying issues or causal factors associated with families choosing to accept services or not. This analysis examines the various factors of those who accept services (as demonstrated by completion of a first home visit) compared with those, during the same time period, who were offered services yet never received a 1st home visit. Programs’ efforts in tracking, measuring, and analyzing acceptance of services are reflected in their Annual Service Review (see Standard 1-4.B.). Programs develop and implement strategies to expand and maintain prenatal enrollment and receipt of a first home visit.

**The site will adhere to all NYS policy guidelines specified above. In addition, please insert site-specific procedures that:**

1. A description of the process for tracking the timing of first home visit in relation to the child’s date of birth.
2. A description of the process for monitoring and adhering to this standard.

**Reference Table**

**Best Practice Standard 1**

*This reference table contains a list of reports in the MIS that can be used to help programs monitor fidelity as well as helpful links and documents related to each policy.*

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| **Policy** | **MIS Reports & Forms** | **Appendix & Links** |
| **1-2.A**  **Program Eligibility Criteria** | * 1-2.B Initial Engagement Process Report | * Details on positive impact of HFNY services   + <https://www.healthyfamiliesnewyork.org/Research/default.htm> * HFNY [One-Step Information](https://healthyfamiliesnewyork.org/Staff/onestep.html) |
| **1-3.A**  **First home visit within 3 months** | * Accreditation/1-3B Timing of First Home Visit report | * [One-Step Enrollment Process Guidelines](https://www.healthyfamiliesnewyork.org/Staff/Documents/One-Step%20Guidelines%208-10-2023.pdf) * HFNY TOL: [One-Step Toolkit](https://tol397.wixsite.com/transferoflearning/supportmaterials) |

1. Offering services refers to notifying a family of their confirmed eligibility for HFNY services and inquiring about their interest in learning more about the program. This is not the same as enrolling a family in services. [↑](#footnote-ref-1)