**Annual Service Review and Equity Plan Review Tool**

Program Name: Choose an item.

Contract #:

Reviewer: Choose an item.

Contract Period:

Date of Review: Click or tap to enter a date.

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| **Standard 1 – Initiate Services Early** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
| **1-1.A** | **Program Eligibility Criteria** |  |  |
|  | Description of Eligibility Criteria  Description of Defined Service Area  Community data (include source and year) used in deciding these criteria  Anecdotal information from staff and community advisory board members  Target Population adjusted **as needed** based on changing demographics or infrastructure  Number of families site has capacity to serve | Yes  No |  |
| **1-1.B** | **Referring Organizations** |  |  |
|  | Identifies relationships with referral partners, community providers  Formal/Informal agreements, if applicable  Collaboration efforts identified  CWP Programs: MOA is signed and renewed annually | Yes  No |  |
| **1-1.C** | **Tracking Referrals and Site Capacity** |  |  |
|  | Quarterly tracks all families identified/referred (as noted on QRs)  Number of families identified or referred by each referral source, or 1-1.C report attached  Eligibility status  The number of enrolled families at the beginning of the contract period.  The number of families discharged in the contract period.  The number of enrolled families at the end of the contract period.  Analysis of data and plan to apply strategies to available fill slots or reduce gaps in service availability  Identifies how the demographic and social factors of the families enrolled compare to your program’s defined service area.  Site shares analysis and strategies with advisory board annually | Yes  No |  |
| **1-2.B** | **Initial Engagement Process** |  |  |
|  | The length of time from referral to initial contact.  The length of time from initial contact to offer of services.  Whether able to establish initial contact or not.  Whether services were offered or not.  Reasons why services were not offered to any families. | Yes  No |  |
| **1-2.C** | **Initial Engagement Process – Developed Strategies** |  |  |
|  | Applied strategies to improve initial engagement **OR**  90% of families received offer of services (3 rating)  Developed strategies (2 rating) | Yes  No |  |
| **1-4.A** | **Measures Acceptance Rate** |  |  |
|  | Boilerplate language included  Site’s current acceptance rate, numbers and percentages |  |  |
| **1-4.B** | **Acceptance Analysis** |  |  |
|  | Large sites with > 50 families, narrative includes:  Percentages & numbers  Anecdotal information (informal analysis)  Comparison of families who refused services to families who accept services, at least three factors (3 rating) OR One or two factors (2 rating)  Reasons why families decline  **OR**  Acceptance rate is at least 90% over a two-year period (one year for new sites)  Small sites with < 50 families offered services over a two-year period:  Informal (anecdotal)  Reasons why families decline  The number of families offered services within the two-year period | Yes  No |  |

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| **Standard 3 – Offer Services Voluntarily** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
| **3-4.A** | **Measure Retention Rate** |  |  |
|  | Boilerplate language(definition)  Site’s current retention rate |  |  |
| **3-4.B** | **Retention Analysis** |  |  |
|  | Larger sites with > 50 families:  Includes percentages & numbers  Anecdotal information  Comparison of families who remain in services to families who leave, at least three factors (3 rating) or One or two factors (2 rating)  Reasons whyfamilies leave  OR  at least 90% of families enrolled over a two year period remained in services (one year for new sites)  Small sites with < 50 active families at any one time over a two-year period (< 25 active families over one year for new sites):  The maximum number of families that were enrolled at any one time.  Informal data about families who leave service or are retained.  Reasons why families are leaving services  A description of how the program is addressing its retention rate based on the analysis of factors identified. | Yes  No |  |

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| **Standard 6 – Promote PCI, Childhood Growth & Development**  **Standard 7 – Health Care and Community Resources**  **Standard 10 – Model Specific Training**  **Standard 12 – Reflective Supervision** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
|  | **Performance Targets** |  |  |
|  | Overview of program’s performance achieving HFNY Performance Targets  Barriers or strengths identified in meeting the targets  How program monitors well childcare visits (7-1.C)  Strategies developed to address barriers identified with well childcare target achievement  Strategies that have been implemented | Yes  No |  |
|  | **Performance Indicators** |  |  |
|  | Overview of program’s performance achieving HFNY Performance Indicators in the last contract year  Barriers and/or strengths identified in meeting the targets.  Description of strategies developed and implemented to address barriers identified | Yes  No |  |

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| **Standard 9 – Service Providers Selection** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
| **9-4** | **Staff Retention and Satisfaction** |  |  |
|  | Data of staff who have left, including position title, hire date, termination date, reasons why they left, and any other pertinent characteristics  Data for 12 months for new sites, 24 months for all others  Summary of staff satisfaction input, including both positive and negative feedback  Staff retention and satisfaction strategies developed (strategies for improvement do not need to be developed when reasons for staff turnover pertain to personal growth opportunities.)  Strategies implemented (3 rating)  If site has no staff turnover in the last two years, evaluates and reports staff satisfaction | Yes  No |  |

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| **Standard 5 – Diversity, Equity, and Inclusion** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
| **5-4.A** | **Family & Staff Input** |  |  |
|  | Efforts to obtain feedback from families and staff  Summary of staff feedback  Summary of family feedback  Includes feedback on use of curricula and program materials  Feedback includes current **and** former families and staff (3 rating)  Feedback includes current families and staff (2 rating) | Yes  No |  |
| **5-4.B** | **Equity Plan (Essential Standard)** |  |  |
|  | (In Chart)  Areas of Opportunity for Growth or Improvement identified  Strategies developed  Timeline identified  Strategies implemented with dates  Formal DEIB Self-Assessment (3 rating) |  |  |
| **5-4.C** | **Equity Plan Review with Community Advisory Board and Staff** |  |  |
|  | Updated strengths and strategies based on feedback from staff  Notes on implemented strategies  Date Equity plan was reviewed with staff(2 rating)  Date Equity Plan was reviewed with advisory board (3 rating)  Summary of feedback from Equity Plan review | Yes  No |  |

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| **Standard 10 – Model Specific Training**  **Standard 11 – Training to Fulfill Job Functions** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
|  | List of trainings provided to staff relevant to target population  Child Abuse and Neglect discussed  List of DEIB trainings  Additional interpersonal and skill development opportunities available to staff  Any training needs that went unmet and how Central Administration can support these needs  Training and technical assistance needs for upcoming year, if known | Yes  No |  |

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| **Program Highlights – Comments** |
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| **Standard GA – Governance and Administration** | | | |
| **Standard** | **Narrative Requirements** | **DEIB Focus** | **Comments** |
| **GA-1.A** | Describes CABs role in advising with regards to planning, implementation, and elevation of site activities | Yes  No |  |
| **GA-1.B** | Roster of Community Advisory Board members  Summary of skills, knowledge, and abilities to effectively serve the community | Yes  No |  |
| **GA-1.C** | Describes how PM partners with the CAB  PM provides site info for meetings and engages CAB in operations | Yes  No |  |

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| **Program Improvement/Plans for Next Program Year – Comments** |
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