healthy families new york

An Affiliate of Healthy Families America™

Supporting Families Right from The Start

CENTRAL ADMINISTRATION POLICY MANUAL

(ALSO REFERRED TO AS THE
NYS MULTI-SITE CENTRAL ADMINISTRATION POLICY MANUAL)

REVISED MARCH 2021

NEW YORK STATE | 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 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 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)

The Central Administration Team provides the statewide system with:
- 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
- Technical Assistance
- Evaluation and Continuous Quality Improvement
- Policy Development

NEW YORK STATE | Office of Children and Family Services

Bureau of Program and Community Development
Project Management and Oversight, Contract Development, Performance Monitoring, Quality Assurance, and Technical Assistance

Bureau of Research, Evaluation, & Performance Analytics (BREPA)
Evaluation Design Planning and Oversight, Data Analysis and Performance Evaluation, Report Preparation

Prevent Child Abuse New York
Training, Staff Development, Quality Assurance, and Technical Assistance

Center for Human Services Research UNIVERSITY AT ALBANY State University of New York
MIS Design and Maintenance, Data Collection and Analysis, Performance Measurement, Report Preparation, and Technical Assistance
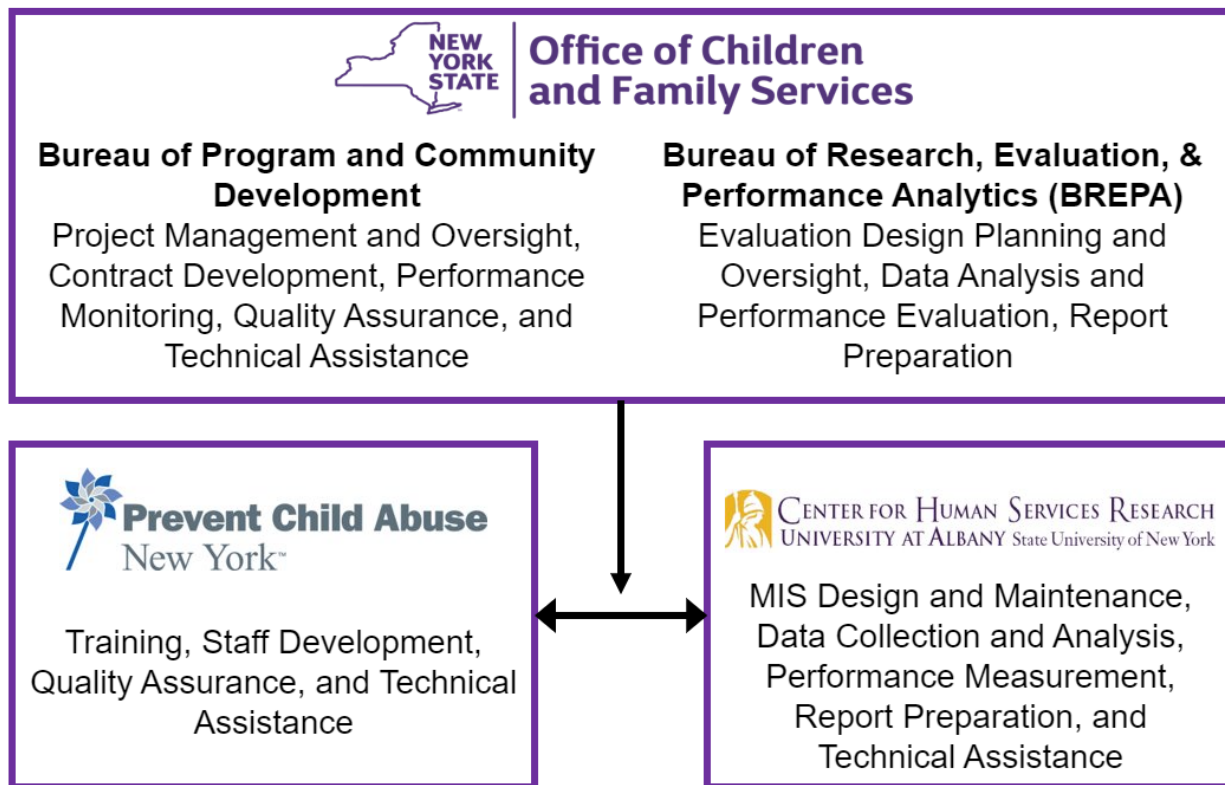
Figure 1. Central Administration Partners

Policies and Procedures

The Central Administration 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.

P-1.1 Central Administration Contractual Requirements Policies

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.

POLICY: Each site performs all services or work as applicable with all provisions of the Master Contract which includes meeting the HFA Best Practice Standards, HFNY Performance Indicators and HFNY Performance Targets and all provisions as set forth in the contracted Work Plan.

Intent: The Central Administration has established written policies governing contractual requirements and operation at the site level.

1. The New York State Office of Children and Family Services-funded HFNY program sites are selected through a competitive Request for Proposal (RFP) process. The RFP solicits proposals from agencies serving very high need areas. In addition to the strength of the proposal, funded programs are able to document the need in their target area as well as strong community collaboration. Funded programs are required to follow the Healthy Families America Best Practice Standards and participate in evaluation activities as well as the accreditation process. These requirements are included in every contract between OCFS and Healthy Families sites (see above). Some communities have adopted the Healthy Families America Model using local funding. Office of Children and Family Services recognizes these programs and their efforts and will provide access to trainings and the MIS when space permits. When possible, HFNY will also provide technical assistance. However, these locally funded sites are not considered part of the HFNY multi-site system.

2. All OCFS funded sites must submit a HFNY Work Plan each year outlining the number of families to be assessed, enrolled, and served each year. Other items include:
   ● 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 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

3. All OCFS funded sites must become affiliated with HFA as part of the multi-site system and adhere to the HFA Best Practice Standards. Each HFNY contract includes Best Practice Standards language as well as the Performance Targets and Performance Indicators as the basic requirements to maintaining their contractual agreements (see Appendices A, B, and C for the 12 Critical Elements, Performance Targets, and Performance Indicators). All Healthy Families New York Programs agree to the following program requirements:
   - Compliance 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 including universal screening in collaboration with relevant community service providers
   - Coordination with local health and social service departments; and other community service providers to support families in receiving needed services
   - Compliance with prescribed performance targets (see Appendix B)
   - Compliance 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
   - Agreement to be affiliated and accredited by HFA
   - Additionally, all contractors with subcontracts will provide oversight that minimally includes review of all program and fiscal reports and claims on a quarterly basis. On-site reviews will be conducted as needed.

4. Other contractual requirements include submitting Quarterly Reports and Annual Service Reports (ASRs) with all required analysis and program updates. 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 Quarterly Report and Appendix E for the ASR Guidelines.

P-1.2 HFNY Site-Specific Policy and Procedures Development and Revision
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 with up-to-date information from other Central Administration functional areas of policy, training, quality assurance, technical assistance, evaluation and administration.

Intent: Sites have input into policy development and revisions. As policy changes may greatly impact site services and therefore direct service staff, input ensures discussion about the impact of new policy on practice. The HFNY Site-Specific Policy and Procedures Manual describes the methods through which input is provided into multi-site policies.

PROCEDURE: The HFNY Site-Specific Policy and Procedures Manual Development for program sites is stated below. Each site will submit a policy manual to their OCFS program contract manager (PCM) for review. New sites are expected to complete a policy manual within one year of operation. All updates to the HFNY Site-specific policy or site procedure will need to be reviewed by the OCFS PCM.

1. The HFNY Site-Specific Policy and Procedures Manual is developed by a committee comprised of members from each part of CA and program (site) staff. Each program is then tasked with utilizing this manual to insert their program-specific procedures before having it reviewed by their PCM.
2. The committee reviews and documents these policies into the HFNY Site-Specific Policy and Procedures Manual as applicable.
3. Once the committee has completed a policy it is sent to all Central Administration for comment. Discussion of policies is incorporated into the CA meetings as needed.
4. After the CA team has reviewed and made comments regarding the HFNY Site-Specific Policy and Procedures Manual they are sent to all Site Program Managers for review and comment.
5. Site Program Managers are encouraged to share all draft policies with all staff to review and discuss the impact on staff and practice.
6. Site Program Managers are encouraged to provide all feedback on the HFNY Site-Specific Policy and Procedures Manual to OCFS. This feedback is provided to the Policy Manual Committee.
7. The Committee meets and revises all policies and distributes the final HFNY Site-Specific Policy Manual electronically.
8. Any concerns identified in any policy will be brought to the next CA meeting for discussion. Central Administration will make the final decision regarding any policy change.
9. HFNY Site-Specific Policy and Procedures Manuals will be submitted to the OCFS PCM for review. In the event that the policy manual is not submitted, the Executive Director of the HFNY program site will be notified. That site will be required to develop a program improvement plan detailing the agency's plans to complete and submit their HFNY Site-Specific Policy Manual to the OCFS PCM.
10. The HFNY Site-Specific Policy and Procedures Manual and the Multi-Site System Central Administration Policy Manual (hereto referred to as the **CA Policy Manual**) are also posted on the HFNY website for reference and Program Managers are required to review with and share all final Policy and Procedure manuals with staff.

PROCEDURE: HFNY Site Specific Policy and Procedures Manual Revisions

1. HFNY Site-Specific Policy and Procedures revisions will be an on-going agenda item at both Regional Meetings with sites and CA meetings with all CA partners. Any changes or updates that are recommended will be discussed at the policy manual committee.
2. The updated policy will be circulated for CA partners and feedback will be incorporated as agreed upon.
3. The policy will then be circulated for comment to all site Program Managers. As stated above, all Site Program Managers are encouraged to share policies with site staff for input. Site Program Managers will provide feedback to OCFS.
4. The policy will be finalized by the policy committee and incorporated as part of the HFNY Site-Specific Policy and Procedures Manual.
5. Any concerns identified in any policy will be brought to the next CA meeting as stated above.
6. The final HFNY Site-Specific Policy and Procedures Manual will be circulated electronically to all Program Sites and maintained in the password protected area of the HFNY website.
7. Sites follow all HFNY Site-Specific Policies and attach their site-specific procedures to each policy.
8. Site-Specific Procedure revisions will be submitted to the OCFS PCM on the due date requested on the electronic distribution. Any changes to the policy manual procedures will also be shared annually at the site visit.
9. 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.
10. In the event that updated policies and procedures are not received annually from a site, the Executive Director of the agency will be notified, and the site will be expected to submit a program improvement plan on how they will complete the updates and submit them to the OCFS PCM.
11. Program Managers attend a Program Manager Orientation that orients them to the procedures surrounding policy manual development. Newly affiliated sites will have one year to develop and submit a policy manual.

P-1.3 Communication Regarding Policy Changes

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.

Intent: Central Administration provides guidance to sites regarding how changes to the HFA Best Practice Standards are to be implemented.

1. Central Administration will post new HFA Best Practice Standards to the HFNY website for program and Central Administration staff to review.
2. Central Administration will begin reviewing changes to the standards at CA meetings and policy changes will be incorporated into the CA Policy Manual and HFNY Site-Specific Policy and Procedures Manual by their respective

committees. Manuals will be distributed as above.

3. Central Administration will provide guidance via conference calls, e-mails, webinars, and Regional and Statewide Leadership Meetings.
4. Site visit, and Quality Assurance visit tools will be updated to incorporate new HFA Best Practice Standards and additional technical assistance is provided during every OCFS, PCANY, and CHSR visit. In addition, data collection may be updated or changed as applicable.

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.

P-2.1 Central Administration Partners and Roles
The Central Administration has established and maintains written policies governing the operation of the Central Administration including policies related to its functioning in the areas of policy, training, quality assurance, technical assistance, evaluation, and administration.

POLICY: Each Central Administration Partner develops policies and operational procedures to support and guide sites in each of the functional areas of policy, training, quality assurance, technical assistance, evaluation, and administration and the timeframe to communicating changes to sites.

Intent: The multi-site system CA develops policies and operational procedures so that all entities that are part of the system are informed of the responsibilities of Central Administration and how each entity interacts with the multi-site system.

Office of Children and Family Services
The New York State Office and 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.

Prevent Child Abuse New York
Prevent Child Abuse New York is responsible for all HFNY Core and other training, 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. On-site QA observations of practice alternate each year between the Family Resource Specialist (FRS) and Family Support Specialist (FSS) roles. During the year that the FRS or FSS QA Specialist is not on-site, they will provide documentation reviews. This documentation review will support supervisors in ongoing professional development and includes but is not limited to supervisor notes, home visit narratives/CHEERS, and parent surveys. A site support and technical assistance component is also provided to sites. Prevent Child Abuse New York has a Director of Training, an Associate Director, 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. In addition, CHSR staff collect data and conduct analyses to support program evaluation activities.

Central Administration Standards Policy and Procedure Development and Revision

Intent: The Central Administration policies are developed and revised/refined, in part with input from sites within the system, and with up-to-date information from other Central Administration functional areas of policy, training, quality assurance, technical assistance, evaluation and administration.

Procedure: Central Administration Standards Policy and Procedure Manual Development

1. The Central Administration policies are developed by a committee comprised of members from each part of Central Administration.
2. Each Central Administration Partner revises and develops policies as applicable to their role in the statewide system to support integration of the six functional areas.
3. The committee reviews and documents these policies in the CA Policy Manual as applicable.
4. Once the committee has completed the policies, they are sent to all CA members for comment. Discussion of policies is incorporated into the CA meetings as needed.
5. After the Central Administration team has reviewed and made comments regarding the CA Policy Manual, they are sent to all Site Program Managers for review and comment.
6. Site Program Managers are encouraged to share the CA Policy Manual with all staff to review and discuss the impact on staff and practice.
7. Site Program Managers are encouraged to provide all feedback on the NYS CA Policy Manual to their OCFS PCM. This feedback is provided to the Committee.
8. The Committee meets and revises all policies and distributes the final NYS CA

Policy Manual electronically. All policy manuals are also posted on the HFNY website for reference.

9. Any concerns identified in any policy will be brought to the next CA meeting for discussion. Central Administration will make the final decision regarding any policy change.

Procedure: CA Policy Manual Revisions

1. Central Administration Policies and Procedures revisions will be an on-going agenda item, as needed, in CA meetings. If changes or updates are recommended by one of the partners, that partner will be responsible for bringing it to the QA/TA Committee prior to bringing it to a CA meeting. 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 updated policy manual will be circulated for CA partners and feedback will be incorporated.
3. The policy will then be circulated for comment to all site Program Managers. As stated above, all Site Program Managers are encouraged to share policies with site staff for input. Site Program managers will provide feedback to their OCFS PCM.
4. The policy will be finalized by the QA/TA Committee and incorporated as part of the CA Policy Manual.
5. Any concerns identified in any policy will be brought to the next CA meeting as stated above.
6. The final CA Policy Manual will be circulated electronically to all Program Sites within one month of its development and maintained in the password protected area of the HFNY website.

P-2.2 Communication Regarding Multi-Site System Operations

The Central Administration communicates, clarifies, and updates sites regarding the goals, objectives, policies and procedures and functions of the multi-site system.

Intent: It is the intent of the Central Administration to inform sites of changes in policy, training, quality assurance, technical assistance, evaluation, and administration that impact site operations. The following mechanisms are used to communicate changes:

Central Administration Meetings

Central Administration meetings occur at least six times per year in the month prior to either the Regional or Statewide Leadership meetings. Central Administration partners use these meetings to collaboratively develop the Regional and Statewide Leadership meeting agendas that cover the six functional areas for these meetings with site leadership. Site visit, program grievances, quality assurance, and technical assistance findings are discussed and addressed along with staff experiences with training and other types of professional development. In addition, CA meetings typically include sharing and discussion of each partners' observations of general trends and specific

circumstances that exist in program practice and management as well as any changes to BPS that affect policies that require adaptions or changes. Discussions may result in plans to develop materials, curricula or community resources, partnerships, policies, or specific training or technical assistance that will address the needs that were observed.

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. These meetings occur in regions throughout the State and meeting minutes are distributed. Regions are divided as follows: Central/Western 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.

HFNY Webinars/Conference Calls
Webinars and/or calls 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.

P-2.3 Training
Central Administration has a policy describing how training is delivered within the system. The policy should include a description of which trainings are provided by the CA and which are the responsibility of the sites.

Training Provided by PCANY:
Central Administration, primarily through the Training and Staff Development team (TSD) at PCANY, offers training that meets 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 training for supervisors is provided by the TSD team with a half day 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. Hiring surveys are conducted annually by the TSD team to learn where there is need for role-specific training and inform the process of locating training events. A training calendar is maintained by TSD that lists dates, locations, and trainers for all TSD training events, and is on the HFNY website. Training announcements are emailed to the state system approximately four to six 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, and clear instructions for registering staff. Registration is maintained by TSD. Every effort is made to communicate clearly and directly with programs to ensure that their needs are met, and questions answered.

The TSD team has guidelines for responding to short-notice cancellation of training in the event of inclement weather, trainer illness, or another emergency. The guidelines stipulate timing and lines of communication, and for making contingency plans, as well as indications for rescheduling the event as soon as possible.

Training to be provided by CHSR:
Role-specific orientation to and training on HFNY data collection and use of the MIS is provided to all staff by CHSR. Supervisors and managers receive training as part of HFNY Supervisor Core and Program Manager Orientation trainings. All other staff receive trainings from CHSR as webinars within the MIS. Additional support is provided upon request.

Training to be provided by the Site:
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, hired on or following July 1, 2014, must receive all the training topics listed in the 11-1, 11-2 and 11-3 standards.

HFNY programs develop their own wraparound training plan and identify resources in their geographic location to meet the wraparound training requirements. Training may be provided by various qualified individuals, including Program Manager, Supervisor, community agency, HFA online training modules, and use various modalities, including video, reading materials, and self-study modules. To support programs in monitoring orientation training, the required 3, 6, and 12-month trainings and all on-going trainings,

CA provides reports to programs through the MIS system. These reports are run every 6 months and programs are notified if one of their staff has not received all required orientation and training.

P-2.4 Quality Assurance (QA)

Intent: There is a system for providing annual quality assurance review to each site. The CA supports each site in assessing model fidelity and improving service quality and offers an objective review by well-trained staff.

The Central Administration has a policy describing the quality assurance process provided, including the frequency of site visits.

Healthy Families New York Policy and Quality Assurance Plan:
The HFNY Quality Assurance Plan was developed and is maintained by a committee comprised of CA partners, representing each branch of CA. The Quality Assurance/ Technical Assistance Committee meets quarterly to review the HFA Central Administration Best Practice Standards surrounding all required Quality Assurance (QA) and Technical Assistance (TA) activities. The committee has established a tracking mechanism for CA QA activities to ensure that at a minimum, CA is meeting all requirements to achieve the HFA standards. CA partners then revise QA visit and site visit tools in order to observe practice at the site level and to provide the necessary TA to assist sites in meeting the HFA Best Practice Standards. In addition to monitoring CA requirements, this committee reviews site performance from accreditation, site visits, Annual Service Reports, Quarterly Reports, Performance Indicators, and Performance Target reports annually to develop targeted Technical Assistance for sites. Surveys administered following a QA or TA contact are reviewed in order to utilize program input on the support provided.

Central Administration has developed a policy for the implementation and review of its Quality Assurance Plan as stated below. The Quality Assurance Plan is comprehensively analyzed at least every two years and will include input from the Sites Program Managers and Supervisors. As part of the QA process there is a follow up conversation after each QA visit from OCFS, PCANY, or CHSR to solicit feedback from Site Program Managers and Supervisors. Feedback is reviewed and analyzed at least every other year and the results reported during CA meetings. The QA/TA Plans will be updated accordingly.

Central Administration has developed and implemented a multi-faceted plan to attend to the quality and effectiveness of the support and services families receive. Central Administration recognizes that the Parallel Process is fully operating in our system, so attention to quality of support at every level of operation deserves our attention, analysis, and support. The three branches of CA meet every other month and meeting agendas include attention to the QA plan. Additionally, any information gleaned from the QA activities of each branch are shared with the other branches so that programs have

the benefit of a unified and well-informed base of support and know that CA has clear and shared expectations for accountability. All site visit reports are shared between CA partners so that everyone is aware of strengths and challenges of each site's adherence to the Best Practice Standards.

Shared orientation to program goals and QA expectations are essential to maximizing the impact of QA activities on improved quality and outcomes. Supervisors and program managers ensure that required orientation to the multi-site system is provided to all staff. These resources are included under the training tab of the password protected HFNY website.

Central Administration recognizes the critical role supervisors and managers play in offering quality services to their communities. The training and support of these staff are attended at every point in the QA plan to ensure that program administrators are able to offer the kind and level of support home visitors need. The QA plan is covered in New Program Manager Orientation training and HFNY Supervisor core training. See Appendices F, G, and H respectively for HFNY Quality Assurance Plan, Quality Assurance Table, and Best Practice Standards Quality Assurance Review Table.

PCANY Training and Staff Development

PCANY Training and Staff Development (TSD) Team offers practice observations and recommendations from another perspective while using the same criteria for all programs. This perspective may confirm what has already been documented and observed by the program, or new strengths and questions may be identified. The goal of this QA is to ensure all program staff receive support, professional development opportunities, and skill development through support of program managers and supervisors. Quality Assurance includes a focus on building skills in HFA's required elements of supervision: administrative, clinical, and reflective.

- Quality assurance will be provided for each HFNY site annually, including at a minimum an observation of a supervision session. On-site QA observations of practice will alternate each year between the FRS and FFS roles.
- During the year, while the FRS or FSS QA Specialist is not on-site, the TSD team will provide documentation reviews. This documentation review will support supervisors in ongoing professional development and will include but not be limited to supervisor notes, home visit narratives/CHEERS and parent surveys.
- Dates for QA visits will be set depending on programs' calendars and staffing patterns, with planning that includes collaboration with OCFS PCMs and use of MIS reports, and detailed written feedback and phone/email follow-up.
- Following the phone call with the Program Manager, the QA Specialist on the TSD Team will draft an agenda for the visit and send it to the Program Manager before the visit. The agenda will include the dates of the visit, the Specialist's arrival time, times for the observations, times when the Specialist will be reviewing notes in preparation for debriefing, times for debriefing, who should be present for various activities, and timeframes for site support activities. It will also

include times to meet with the Program Manager at the start and end of each day. See Appendix I for the Current BPS QA Site Visit Tool.

SITE SUPPORT

Content of site support is standardized based upon information learned about direct practice and statewide training needs, information learned about the site through the quality assurance system, direct feedback from programs, OCFS PCM site visits, and staff response to training events.

FOLLOW-UP

After the Program Manager has reviewed the written documentation from the visit, they assure that the direct supervisor of the observed staff reviews it with them. This is indicated by completing the information in the box at the end of each QA observation form. This Follow-Up Plan draws on the ideas for professional development offered in the documentation, the debriefing conversation and/or resources that were included.

Within 30 days of receiving the documentation, QA Specialists and Program Managers (and supervisors if requested) have a follow-up phone call to discuss any aspect of the visit, including the Quality Assurance Site Support (QASS) feedback form, QA Follow-Up Plans to support the professional development of observed staff, and the Site Support Training, to support attendees' integration of the material shared. Program Managers are encouraged to reflect on how the learning from the visit can be extrapolated to broader program practice. The QASS feedback form is the formal means through which PCANY collects information and feedback on the QA process. The feedback form is also the place where the Program Manager is asked to identify what will be done within the program to address the feedback from the visit. The QASS Feedback forms are submitted by Program Managers before the call date so that QA Specialists can prepare to discuss this information on the call.

Quality Assurance is scheduled and tracked on a spreadsheet by the PCANY team.

CHSR Protocols for Quality Assurance of Data Management System:
The multi-site system's data management system (automated/manual) reflects both current and historical perspectives and is able to capture data necessary to monitor adherence to the accreditation standards.

Since its inception in 1995, HFNY has made available to all sites a computerized data collection system. In 2013, it was converted to a web-based application that is available to all sites and CA members. 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. Initially, the data were recorded on paper forms and were entered into the management information system by data managers at each site. Now, most staff enter their own data into the system. 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.

Data collection instruments include but are not limited to:
- Screen
- Pre-Assessment Activity form (activities of FRS leading up to assessment)
- Parent Survey/HITS/Audit C/PHQ2 with Narratives
- Pre-Intake Activity form (activities of FSS leading up to enrollment)
- Identification and Contact form
- Intake form/ PHQ9 for pre-natal families
- Home Visit Log with Narrative
- Service Referral form
- Target Child Identification and Birth Outcomes form/PHQ9
- Target Child Medical form
- Caregiver Medical form
- Ages and Stages Questionnaire
- Ages and Stages: Socio-Emotional Questionnaire
- CHEERS Check-In form
- Follow-up form/ PHQ9
- Service Plan
- Family Goal Plan
- Change form
- Father/Father Figure Identification Information form
- Group Visit Log form
- Worker Upon Hire form
- Worker Change form
- Worker Training Exemption form
- Site Training Record form
- Supervision form
- Discharge form

Once the data have been entered into the MIS, they are available to be analyzed by site program managers and CA staff through a series of reports. These reports are used to help data gatherers anticipate when data need to be collected, to monitor both fidelity to the HFA critical standards and the achievement of NYS performance outcomes. 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. Information from the MIS is used by each site to make quarterly reports to their funder (OCFS) and is also used to inform and help prepare OCFS, PCANY, and CHSR for site visits and quality assurance visits.

Several training modules are included in the MIS, such as video tutorials to get started using the system, several e-learning modules on data entry, and webinars on the basic forms in the system. The Center for Human Service Research also performs hands-on training on the connection between data entry and outcome measurement, and in the use of the MIS for supervision and program management, during Supervisor and Program Manager core trainings.

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

Where data are required in the accreditation process, the MIS offers reports and provides evidence for their site assessment to help program managers and supervisors monitor their adherence to these standards. Most reports afford flexibility in the time frame and the cohort. For example, some reports may be run by site, by individual supervisors or workers, by participant, or by other site-specific variables. For training reports, the user can choose to include only workers hired after a specific date.

The MIS system provides statewide reports for analysis and accommodates data collection aspects that meet the MIECHV reporting requirements. The Center for Human Service Research evaluates (QA report and calls) each site's data to determine the quality of data entry in the MIS system. The Center for Human Service Research provides technical assistance surrounding each sites' data collection in order to enhance the quality of data being collected. The Center for Human Service Research maintains the "MIS Help Desk," responding to user's requests and questions. The Center for Human Service Research also reaches out directly to programs to hold coaching calls and provide additional support.

OCFS Protocols for Quality Assurance

The New York State Office of Children and Family Services PCMs 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. 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 New York State Office of Children and Family Services staff will score as much of the site visit tool as possible prior to the actual site visit. Much of the family specific information can be reviewed prior to the visit. In addition, the OCFS PCM will run MIS data, review Quarterly Reports, and Annual Service Reports to obtain pertinent information to score each tool. The site visit tool incorporates necessary elements of the HFA Best Practice Standards. See Appendix I for current site visit QA tool and Appendices J, K, L and M, for the years 1-4 Program Performance tools, respectively.

Activities On-Site

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, the family files, supervision files, and any other documentation are reviewed in order to obtain evidence of adherence to the Best Practice Standards that are being evaluated. The New York State Office of Children and Family Services PCMs meet with FSSs and FRSs asking specific questions regarding their practice, understanding of Policies and Procedures, supervisory support, and worker safety. In addition, supervisors are also interviewed with the same focus for their perspective. At the conclusion of the site

visit, OCFS 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 in Program Utilization, Performance Indicators and Performance Targets as applicable, Contractual Requirements, the Safety and Sentinel Standards that scored a one, and Family Retention. Site program managers are required to provide quarterly reports to OCFS detailing the progress on any plan that was submitted to correct issues identified in the 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.

In addition to the above on-site activities, the following activities are done a minimum of once a year to monitor 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 whether the program reached the full target population, staffing patterns, recruitment and retention, training needs and staff development, quality management, fatherhood engagement, outreach and engagement, activities related to performance, capacity, progress and barriers related to reaching performance targets and indicators, program enrichment, funding, public relations, and community systems, and program improvement follow up. (See Appendix D).
- Annual Service Report Review - Includes a review of the following topics: the target population, cultural analysis and plan, outreach and referrals, screens and the timing of screens and assessments, acceptance of assessment and services, capacity, utilization, acceptance rate (including verbal acceptance), retention, performance targets, performance indicators, staffing (including staff retention), curricula, staff and family input, other achievements, and challenges. (See Appendix E).

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

<u>P-2.5 Technical Assistance (TA)</u>
The Central Administration has a policy used to define how technical assistance is provided to the sites including timeframes for delivery of technical assistance, types and amount of TA available to sites and whether TA is prioritized to sites.

Intent: It is the Central Administration's intent to ensure that all sites can access support on a regular basis while prioritizing the needs of sites who may need support more than others due to leadership changes, staff turnover, etc.

Central Administration supports best practices in the state system by providing a range of technical assistance support. HFNY Technical Assistance (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. Instances requiring TA could be sustained poor performance on the Performance Indicators for two periods, under 50% capacity for two rating periods, or providing services with low model fidelity. CHSR may also recommend TA for sites that have sustained patterns of poor performance over the years or are experiencing specific difficulties in program implementation requiring targeted support. This might also include on-going practice issues for home visitors or supervisors. Sites may also request TA from CA members to assist them with any needs that may arise.

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

OCFS
- All new sites will receive technical assistance visits at a minimum of twice per year for the first year.
- Site visits contract management: Annual contract development, receipt and review of quarterly and annual reporting by program sites, and quarterly, bi-annual and annual MIS analysis reports
- File reviews
- Staff interviews
- Review of MIS reports
- Review of Quality Assurance (QA) and Technical Assistance (TA) activity reports
- Consultation with program site administration and staff
- Consultation with CHSR and TSD
- Response to inquiries from sites
- New program managers at a site will receive TA as needed.

PCANY
- Annual training survey of all programs
- 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 post-visit
- Collaboration with CA partners and program administrators to identify site-specific needs

- Quality assurance and site support, including evaluations from participants
- Response to inquiry from sites

CHSR
- 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
- Handling inquiries for assistance related to the MIS from programs through the MIS Help Desk

Other Sources of Information
Additionally, information is gathered via quarterly Regional Meetings and bi-annual Statewide Leadership Meetings. Leadership Meetings are attended by CA partners and sites' program managers. In some instances, program supervisors also attend these meetings.

Regular CA meetings typically include sharing and discussion of each partners' observations of general trends and specific circumstances that exist in program practice and management. Discussions may result in plans to develop materials, curricula, community resources or partnerships, specific training or technical assistance that will address the needs that were observed.

How TA is delivered

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 culminate in trainees completing 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.

Supervisor Training

The Four-Day HFNY Supervisor training provided by PCANY also includes MIS orientation and training provided by CHSR staff. Follow-up support is provided to supervisors by CHSR staff based on individual needs revealed in the training.

Site Visits and Conference Calls
In addition to Orientation and Training, additional TA site visits and conference calls 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
- Introduction to Performance Targets and Performance Indicators
- HFA Best Practice Standards
- HFNY Site-Specific Policy and Procedures Manual

TA Site visits to new programs occur at least twice in the first year by one or more CA partners.

Planning for TA visits is a collaborative effort between the program site and CA. TA visits can result in a Practice Improvement plan for the program. Visits are followed by written documentation of the visit and next steps. Follow-up calls or additional on-site consultation may also be offered. After the TA visit, the visitor(s) share observations and documentation with the OCFS PCM.

Most often the TA effort and follow-up plan is shared with all of CA as part of quarterly 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 New York State Office of Children and Family Services 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.

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.

See Appendix N for the full TA Process Document, Appendix O for the TA Process Flow Chart, and Appendix P for the TA Form. Additionally, see Appendix Q for Central Administration TA Compliance Monitoring Chart. The Technical Assistance Plan will be comprehensively analyzed at least every two years and will include input from the sites' Program Managers and Supervisors.

P-2.6 Protection of Participant Privacy and Confidentiality
Central Administration has policies and procedures describing the protection of participant privacy and confidentiality assurances for sharing data within and outside the system.

Intent: This includes using locked file cabinets to store paper files and password protection for electronic files. Procedures ensure that former database users no longer have access to data and there is a plan for periodically changing passwords. Database safeguarding must include password protection on screensavers (using only a password on Windows or network start-up is not adequate).

Central Administration requires all sites to adhere to the confidentiality standards outlined in the *HFNY Policy Manual: Section GA-5 Family Rights and Confidentiality* (see Appendix R for complete site-level policy). Just as sites are required to follow GA-5, CA members are required to adhere to confidentiality standards related to MIS access and protection of data, data sharing, the Healthy Families New York website, protection of documents, and research and evaluation confidentiality. Specifically, CA members must:

a. Sign a confidentiality agreement to keep participant information confidential including the acceptable use of HFNY MIS. Staff keep their MIS password confidential.

b. All family files are stored in locked file cabinets or electronically on the MIS or other computer-based filing system (encrypted and password protected).

c. Files are not left open on staff's desk.

d. Staff log off MIS when leaving the desk or office.

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

f. Central Administration members discuss information related to families only with other CA members, site staff, administration, funders and HFA (If site were to participate in any outside evaluation project –see GA-4).

g. Central Administration members do not talk about the families being served with friends or family members.

h. Central Administration members do not use the name of the family member (or any identifying information) in any public area.

i. Project staff must agree not to disclose any personally identifiable information outside of their official duties and to maintain the physical integrity of all personally identifiable information outside of their official duties.

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

k. 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 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.

l. 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.

m. Any proposals to conduct research studies involving HFNY staff or participants,

past or present, must be presented to CA for review and approval prior to engaging in any research. This process is detailed in the HFNY Policy Manual: Section GA-4 Research Proposals and later in this manual in P-2.8.

n. The HFNY Management Information System is designed and is maintained in a manner that ensures the strictest confidentiality of individually identifiable information. All CHSR staff members and OCFS researchers are required to complete the University's Institutional Review Board (IRB) on-line training course, and to receive certification in the protection of human research subjects. The University at Albany Institutional Review Board follows all state and federal provisions for the protections of human subjects in research.

o. Dissemination of results to the public occurs through reports of group level data, which will not contain information that can be identifiable to individual participants.

P-2.7 Voluntary Choice in Evaluation and/or Research

The Central Administration has policies and procedures describing the voluntary choice for participant families in regard to evaluation and/or research.

Central Administration requires that upon a new family's enrollment all sites inform them of their rights and ensures confidentiality of information both during the intake process as well as during the course of services as participants in any evaluation and/or research activities conducted by the HFNY state system via the informed consent form. Families are informed that their participation in the evaluation and/or research activities is voluntary, that they can refuse to participate or withdraw at any time, and that receipt of services is not contingent upon participation in evaluation and/or research activities. Families are also provided with contact information should they wish to check the information that is collected about them.

P-2.8 Approval/Denial of Research Proposals

The Central Administration has a policy and procedure for reviewing and recommending approval/denial of research proposals involving past or present families or the use of family data.

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-4 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.

1. When 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[1].

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 to:

    > 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. The HFNY CA will abide by OCFS timeframes for review of all research proposals. Currently, the BREPA review of the research proposal is conducted by researchers who are also members of HFNY CA which expedites the initial stages of the OCFS review.
9. Once OCFS approval of the research proposal has been received, the OCFS researcher will notify HFNY CA and send a summary of the approved research design and contact information for the Principal Investigator to the HFA National Office (via the HFA Implementation Specialist).
10. 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.
11. 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.
12. 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.
13. 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. Up to 20 business days shall be required 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.

P-2.9 Background Checks

Central Administration has policies and procedures regarding background and reference checks on CA staff and subcontractors who have access to families or their identified data.

In compliance with HFA Safety Standard A 6.2, 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 and/or credit check. The prospective employee will submit information required for such checks to allow the organization to conduct the screening checks. PCANY will assume 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.

A.5 Equal Opportunity Employment
The Central Administration (and subcontractors, if applicable) actively recruits, employs, and promotes qualified personnel and administers its personnel practices without discrimination based upon age, sex, race, ethnicity, nationality, handicap, sexual orientation, or religion of the individual under consideration.

The Central Administration has policies and procedures regarding equal opportunity employment.

The Central Administration follows the policies regarding equal opportunity employment dependent on which of the partners the CA member is employed.

OCFS
The New York State Office of Children and Family Services Office of Equal Opportunity and Diversity Development (EODD) sets forth the policies and procedures for establishing hiring practices within the civil service and state system.

Mission of OCFS EODD
The Office of Equal Opportunity and Diversity Development (EODD) is responsible for ensuring that efforts by the Office of Children and Family Services (OCFS), to continue advancing the well-being and safety of our children, families, and communities, are accomplished while promoting equal employment opportunities and diversity programs within the agency. EODD is committed to providing an environment free from discrimination, and/or harassment on the basis of race, color, age, sex, marital status, religious creed, mental or physical disabilities, veteran status, and/or sexual orientation.

Furthermore, EODD is responsible for carrying out Affirmative Action objectives. Affirmative Action does not establish a quota system, but rather employs a system developed by the

Department of Civil Service as a means to meet OCFS hiring goals by integrating members of the protected class into the workforce. The protected class consists of women, persons with disabilities, Vietnam-era Veterans, persons with military status, racial minorities and persons with alternative sexual preferences. Protection from discrimination is afforded everyone on the basis of age, race, sex, religion, marital status, disability, criminal background, sexual orientation, and/or national origin.

PCANY

Prevent Child Abuse New York is an equal opportunity employer and employs persons without regard to race, ethnicity, creed, color, sex, sexual orientation, gender identity, age, place of national origin, veteran status, physical or mental handicap, except where related to ability to perform the job, or other characteristics as protected by state and federal law. To achieve equal employment opportunity for all persons in the filling of its staff positions, PCANY uses the following procedure: a) announces positions available at PCANY to organizations in the community or field including minority groups and women's organizations; b) identifies PCANY as an equal opportunity employer in advertisements for employment; and c) uses only those employment agencies that do not discriminate on the basis of race, color, religion, sex or national origin.

Prevent Child Abuse New York complies with Title 8 United States Code, Section 1324 A, which requires employers to verify employment eligibility of individuals on Form I-9.

The Equal Employment Opportunity Commission (EEOC) has issued guidelines setting forth the Commission's interpretation regarding sexual harassment as a violation of Title VII of the Civil Rights Acts of 1964. These guidelines are consistent with our longstanding policy that conduct creating an intimidating, hostile or offensive working environment will not be tolerated and those violating this practice may be subject to disciplinary action up to and including discharge. Any employee, who feels that he or she is being subjected to harassment, is urged to immediately contact the Executive Director or the PCANY Board's Finance and Administration Committee.

The Harassment Policy is binding upon all employees, volunteers, and Board members.

CHSR

The Center for Human Services Research complies with all employment policies and procedures of the Research Foundation of the State University of New York. These policies and procedures are as follows:

The Research Foundation is committed to equal opportunity and non-discrimination in employment for all qualified persons without regard to race, color, religion, sex, gender identity or expression, national origin, citizenship, age, creed, disability, veteran status, marital status, familial status, military status, domestic violence victim status, sexual orientation, genetic characteristics/genetic information, or any other trait protected by federal, state, or local law. This policy applies to all employment practices including hiring, advertising, recruitment, promotion, demotion or transfer, layoff or termination, rates of

pay or other forms of compensation, and selection for training and development.

Affirmative Action Employer. As an affirmative action employer, the Research Foundation has established outreach programs to provide employment opportunities to women, racial minorities, and individuals with disabilities, special disabled veterans, Vietnam Era veterans, recently separated veterans, Armed Forces service medal veterans, and other protected veterans, consistent with federal law.

Reasonable Accommodations for Qualified Individuals with Disabilities. The Research Foundation is committed to providing equal employment opportunities to qualified individuals with disabilities. To that end, the Research Foundation will provide reasonable accommodations to such individuals during the application/hiring process or to perform the essential functions of their positions, except where doing so would pose an undue hardship.

Prohibition Against Discrimination, Harassment, and Retaliation. The Research Foundation prohibits employees, representatives, vendors, contractors, or other persons doing business with or for the RF from engaging in Discrimination, Harassment, or Retaliation. Discrimination, Harassment, or Retaliation may not occur in the performance of Research Foundation business, at a Research Foundation sponsored event, or on Research Foundation or SUNY property. Discrimination, Harassment, and Retaliation is also prohibited in off-duty conduct between individuals who work together on RF business.

All employees are expected to comply with this policy and the Resolving Discrimination, Harassment, and Retaliation Procedure, to take appropriate measures to ensure that prohibited conduct does not occur, and to report any suspected policy violations to the local operating location's Complaint Manager. An employee's obligations under this Policy include reporting any violations witnessed by the employee, regardless of whether the employee was the victim or target of the offending conduct. The Research Foundation will take appropriate disciplinary action against any employee who violates this policy. Based upon the seriousness of the offense, disciplinary action may include verbal or written counseling, suspension, or termination of employment.

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.

Intent: *Sites which are not performing according to the critical elements or contract, when applicable, need close monitoring and ultimately a determination of whether the site will remain as part of the multi-site system. Sites should also be informed when disaffiliation is tied to funding.*

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 three months 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.

Central Administration provides some technical assistance to locally funded sites implementing the HFA model as our infrastructure allows, which includes training as available, site visits, and introduction to the HFA Best Practice Standards as well as access to MIS.

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 if they have met both of the following conditions for a span of three years:
1. Sustained a poor rating on the Performance Indicators (50% or below) for three years.
2. The site remained at less than 50% of capacity for three years.

And the 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 three months.

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 all CA partners.
- 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 appeals process.

Intent: Because of frequent interactions between the CA and its sites, a formal grievance policy and procedures exists to ensure fairness in resolving issues when the need arises and when less formal communication processes are insufficient. An appeals process is also included in the policy. The grievance policy is communicated to all sites in the system.

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 technical assistance 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 House Counsel and the Associate Commissioner as appropriate.
3. The final decision will be relayed to all parties in writing.

P-5. Critical Incident Policy

Intent: Though not common, situations may arise when the CA must utilize public relations for damage control to minimize the negative effect caused by an event or series of events. Public relations are about building, improving and maintaining the public image and perception of an individual, company or organization. To ensure the most appropriate response and public communication about such events, sites are to communicate critical incidents to the CA within 24 hours, and the CA likewise communicates these to the National Office when the situation garners heightened media attention. Should the National Office be contacted by the media, national staff must employ its own public relations response. In each case, the CA and National Office can do effective public relations work when information of the incident has been communicated in a timely way. The National Office has a critical incident form to be used for communication purposes.

Participant and Program Critical Incident Policy
Home visitors must immediately notify the Program Manager and/or supervisor in the event of a participant or participant's household member's death, critical injury, serious abuse incidents which prompt local investigation or media involvement, as well as litigation pertaining to Healthy Families work or services, 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 escalates to state and/or national level attention and submit the critical incident report form provided by the HFA national office. See Appendix S for the Participant Critical Incident Report and Appendix T for the Program Critical Incident Report.

Intent: *Critical incidents that affect the program staff and participant families, including the death or critical injury of a program participant, serious abuse incidents which prompt local investigation or media involvement, as well as litigation pertaining to Healthy Families work or services, staff witnessing a violent incident, an assault of program staff, threats against the program or program staff, and natural disasters, may create a deep sense of loss for the families and staff. This policy assures that both staff and family members are supported through the grief/loss process, or to address their sense of safety. This could include additional reflective supervision, short-term transitional home visits with the family, the offer of grief counseling when these resources are available, etc.*

1. In the event of critical incident, including the death or critical injury of a participant household member, 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, serious injury of staff on duty, the staff that becomes the first one aware of the incident immediately informs the Program Manager and/or supervisor. 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 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).
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-6A 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.

Appendices