**DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Safety and Permanence

Family Foundations Home Visiting Program

Scope of Services

For the period of       -

**Use of form:**  Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)m), Wisconsin Statutes].

**Instructions:** Tab to add more rows in tables.

|  |  |  |
| --- | --- | --- |
| Program Name      | Agency Name      | Agency Address      |
| Contact Name      | Contact Telephone Number      | Contact Email Address      |
| Target Population      | County or Zip code Service Area      |

Local Implementing Agencies (LIA) are Family Foundations Home Visiting Program (FFHV) grantees who deliver high-quality, evidence-based home visiting services. LIA must use one of the five national home visiting models approved for use for FFHV: Healthy Families America, Early Head Start Home-Based, Nurse Family Partnership, Parents as Teachers, or Family Spirit. The LIA must provide services in compliance with their model guidelines and best practice standards for serving at-risk communities and families at risk for poor maternal, infant, and early childhood outcomes. LIA must have 75% or more of the families enrolled prenatally. LIA must demonstrate that at least 60% of their enrolled families must be part of 3 or more of the Maternal, Infant, Early Childhood Home Visiting (MIECHV) priority populations: Low income household, Pregnant woman under 21 years of age, Household has a history of child abuse or neglect or has had interactions with child welfare services, Household has a history of substance abuse or needs substance abuse treatment, Someone in the household uses tobacco products in the home, Someone in the household has attained low student achievement or has a child with low student achievement, Household has a child with developmental delays or disabilities, Household includes individuals who are serving or formerly served in the US armed forces.

Home visiting services will work toward the following program outcomes:

* Improved maternal and child health;
* Reduction of child injuries, child abuse, and neglect and child maltreatment, and emergency department visits for children and mothers;
* Improvement in school readiness and achievement;
* Reduction in domestic violence;
* Improvement in family economic self-sufficiency; and
* Improvements in the coordination and referral for other community resources and supports.

LIA is contracted for a number of home visiting slots as defined by the program capacity outlined in this DCF contract. LIA must ensure that program recipients’ participation in services is voluntary, as reflected in practice and any relevant policies and procedures.

LIA will implement an evidence-based curriculum for use with the priority populations as part of or as a supplement to model-provided curricula. LIA must use high-quality, family-centered screening and assessment practices. LIA must implement flex funds policy to uniformly make funds available to all families in the home visiting program.

LIA will demonstrate a commitment to a culture of quality, placing high value on using data to understand, evaluate, and improve services and drive program decision-making. LIA is required to collect and report data to meet federal reporting and evaluation requirements. This includes entry into DAISEY, the DCF-administered data system. LIA is required to participate in DCF-led continuous quality improvement projects and collect data using provided guidelines for each individual project. LIA must allocate sufficient funds and staff resources to assure the collection of all required data elements.

LIA will make available a minimum of $250.00 of flex funds per enrolled family. Flexible funds assist families and the home visitor/case manager to obtain goods or services that are needed immediately for family safety and functioning and for which no other source of payment exists. Examples of allowable costs include those for parenting classes, transportation to classes, infant cribs, car batteries, minor home repairs, eviction prevention, etc. The 50% cash match required for flexible funds provided by the county, private agency, tribe, or tribal organization may be included in the required match of 25% of the total amount awarded

LIA is required to report to the state at least quarterly on program activities, including staffing, training, outreach, and enrollment. LIA will participate in FFHV annual site visits. LIA representative will attend all mandatory FFHV grantee meetings. Expenditures will be submitted to SPARC by the 20th of the month following the month that the expenditures occurred.

The LIA shall submit an inclusion request to the [2-1-1 Wisconsin Database](https://211wisconsin.communityos.org/public-agency-update) and [WELL BADGER](https://www.wellbadger.org/s/professionals?language=en_US) within the first three months of this contract period, so that services/programs provided under this DCF grant are included on the 2-1-1 database. The LIA will maintain this inclusion on the 2-1-1 database and WELL BADGER through the duration of this contract and any subsequent contract renewals. The LIA will be required to review this standing on the 2-1-1 database and WELL BADGER annually and maintain accuracy of agency and program information. If the LIA and the service(s) are already included in the 2-1-1 database and WELL BADGER, the LIA will provide assurance of this inclusion and review this standing annually to maintain accuracy. If the service(s) provided under this DCF grant does not meet the Database [Inclusion Policy](https://211wisconsin.communityos.org/inclusion-exclusion-policy) for 2-1-1, the LIA will provide this and the explanation why it cannot be included.

**Evidence-Based Models Implemented (check all that apply)**

[ ]  Healthy Families America

[ ]  Nurse Family Partnership

[ ]  Parents as Teachers

[ ]  Early Head Start Home Visiting

[ ]  Family Spirit

If checking more than one box, provide policy on enrolling families to Family Foundations Home Visiting Coordinator

**Staffing Plan**

[ ]  Yes [ ]  No Our staffing plan meets the national model standards

Complete and return the provided FFHV staffing plan form to Family Foundations Home Visiting Coordinator

**Program Capacity** – Point in Time number of families served. Program is expected to be serving at least 85% of the point in time capacity on any given day. Programs are not limited to serve the point in time number if the program has more capacity.

|  |  |  |
| --- | --- | --- |
| Number of FTE Home Visitors (from staffing plan) | National Model expectation of families per full time FTE | Program point in time capacity(Total FTE x Families per FTE) |
|       |       |       |

***Assurances:***  The follow assurances are required by agencies when accepting Family Foundations Home Visiting Funding.

**1. Model Fidelity**

[ ]  Yes [ ]  No Our program maintains accreditation or affiliation with and is in good standing with the national home visiting model.

Provide documentation of program’s our standing with national evidence-based model to Family Foundations Home Visiting Coordinator.

**2. Voluntary Services**

[ ]  Yes [ ]  No Our agency assures that all services provided to families on a voluntary basis.

Provide policy, forms, or other documentation to Family Foundations Home Visiting Coordinator.

**3. Re-Enrollment**

[ ]  Yes [ ]  No Our agency assure participants are served by only one home visiting program at a time. Our agency has policies and procedures for re-enrollment under the following circumstances: 1) after disengagement and 2) following program completion, and 3) upon subsequent pregnancy.

Provide policy, forms, or other documentation to Family Foundations Home Visiting Coordinator.

**4. Use of Flex Funds**

[ ]  Yes [ ]  No Our agency ensures access to flex funds with families in accordance with the program policy and FFHV requirements.

Provide policy, forms, or other documentation to Family Foundation Home Visiting Coordinator.

**5. Participant Incentives**

[ ]  Yes [ ]  No Our agency uses participant incentives that align with MIECHV requirements.

[ ]  Yes [ ]  No Our agency has a policy on participant incentives that align with MIECHV requirements.

Provide policy, forms, or other documentation to Family Foundations Home Visiting Coordinator.

**6. Quarterly Program Reports**

[ ]  Yes [ ]  No Our agency will submit FFHV quarterly reports by the 15th of the month in January, April, July, and October.

**7. Budget Modifications**

[ ]  Yes [ ]  No Our agency understands prior approval is required from the Home Visiting Coordinator if expenditures will vary by more than 20% for any approved budget category (e.g., personnel, travel/training, supplies, etc.).

**8. Data Reporting, Evaluation, and CQI Activities**

[ ]  Yes [ ]  No Our agency understands and will participate in FFHV Data Reporting, Evaluation and CQI participation as requested by DCF.

**9. Training and Supervision**

[ ]  Yes [ ]  No Our agency understands we must provide regular, high-quality, supervision for program staff, including reflective supervision for home visiting staff as required by our evidence-based home visiting model.

[ ]  Yes [ ]  No Our agency will have staff complete all trainings required by our evidence-based home visiting model.

[ ]  Yes [ ]  No Our agency will support ongoing professional development of home visiting staff.

**10. Annual Program Visits**

[ ]  Yes [ ]  No Our agency will participate in our program site visit by DCF for program consultation and contract monitoring.

**11. United Way 2-1-1and WELL BADGER Inclusion**

[ ]  Yes [ ]  No Our agency will submit or renew an inclusion request to the [2-1-1 Wisconsin Database](https://211wisconsin.communityos.org/public-agency-update) and in [WELL BADGER](https://www.wellbadger.org/s/professionals?language=en_US) within the first three months of this contract period for community outreach purposes.

**12. Child Sexual Abuse Prevention Requirement**

[ ]  Yes [ ]  No Our agency written policies and procedures regarding the prevention of sexual abuse of children and youth. The policies and procedures must address, at a minimum, all six components of child sexual abuse prevention as outlined in the Centers for Disease Control and Prevention (CDC) Guide: *Preventing Child Sexual Abuse Within Youth-serving Organization: Getting Started on Policies and Procedures*, including:

*1*) screening and selecting employees and volunteers;

2) guidelines on interactions between individuals;

3) monitoring behavior;

4) ensuring safe environments;

5) responding to inappropriate behavior, breaches in policy, allegations and suspicions of child sexual abuse; and

6) training about child sexual abuse prevention.

*For reference, the CDC Guide can be found at the following link:* [*https://www.cdc.gov/violenceprevention/pdf/preventingchildsexualabuse-a.pdf*](https://www.cdc.gov/violenceprevention/pdf/preventingchildsexualabuse-a.pdf)