



California Home Visiting Program Monthly Conference Call

Meeting Minutes

Thursday, July 11, 2013

1:30-3:00 p.m.

Participants: MCAH Directors and Coordinators of MIECHV Funded Programs

Meeting Facilitator: Kristen Rogers

I. General Updates – Kristen Rogers

- a. **Client Enrollment and Implementation:** The ETO Connect, which is the connection between NFP data and our data, is down for about 5-6 weeks while Social Solutions and NFP resolve some errors. Further, the HFA data is on hold while we continue to upgrade ETO to TouchPoints. Our numbers only reflect data through June 21:
 - i. Number of Families Enrolled = 1,405
 - ii. Number of Home Visits Completed = 13,624
- b. **Home Visiting Staff:** Laurel's assistance is needed temporarily elsewhere in the division and as a result her availability to CHVP will be more limited. In the meantime, please direct correspondence normally directed at Laurel to Chris.

Effective July 1, 2013, Nora Benavides has resigned from NFP. Sites should continue to work with their CHVP QA Teams and NFP assigned Nurse Consultant (likely Amy Marrero). We are working with NFP to ensure no interruption in services or plans (such as the August sustainability workshop for Bay Area counties).

- c. **NCC Application and Funding Opportunity Announcement:** CHVP has received the NCC Application for the Competitive Expansion Grant and it is due August 5, which gives us just 30 days for completion. A part of the NCC is to provide an update on site activities and progress toward meeting program goals. Much of this information comes from your progress reports. We recognize that the progress report deadline is close to the NCC deadline. We hope to complete work on the NCC despite this



fact, but may need to arrange conference calls with individual sites to gather any needed information.

A Funding Opportunity Announcement (FOA) will be released within the next two weeks for the formula grant. The formula grant has changed and is now a competitive grant as well. Once we receive the FOA, we will have 30 days to complete our application and submit to HRSA. The FOA will also require an update on site activities and progress toward meeting program goals, and so similar conference calls may be necessary with individual sites.

A new requirement from HRSA for both the NCC and FOA will be a calculation of cost per family served at each site. This appears to be a requirement that will remain in place for all future deliverables to HRSA. We will be calculating that here and can share that with you in the future.

Guidance does show how sequestration will take effect. The amount of funding to CHVP for both grants will be reduced 5.1 percent. For the formula grant, the sequestration cut will be offset by a redistribution of former EBHV funding. We are in the process of updating our projections for both grants and after doing so we will have a better sense of the impact to competitive grant funding.

The important part of this for you all is that we need help to ascertain the impact of all of this and need invoices submitted as soon as possible so our projections can reflect actual expenditures.

II. Budgets and Allocations

2013-2014 AFA Packet: Please submit your proposed budgets and completed AFA packets as soon as possible so we can review these, contact sites if needed, incorporate revisions, and finalize in time for sites to begin invoicing. A reminder that CHVP has to obligate funds by the end of the federal fiscal year (September 30), which is the end of the first quarter in the state fiscal year. Failure to obligate all funds will result in CHVP returning funds to HRSA and these will be gone forever. CHVP funding decisions and projections are based on full obligation of funding each federal fiscal year. Stephan Fong, one of the contract managers, is here to provide help with questions.



III. Updates From the Program & Eval Sections:

- a. **Upcoming Site Visits – Arlene Silva:** Please anticipate a site visit for Fiscal Year (FY) 2013-2014 by the QA team. The purpose of this site visit is contractual, whereby the QA team reviews the SOW for FY 2013-2014 activities and deliverables, such as evidence of process and outcome measures, observation of home visit activities and assessments, and review of client records. For instance, a Process Measure in the SOW: *“Supervisor and/or Home Visitor shall conduct periodic chart audits and report results and number reviewed.”* The QA team will then review evidence of the chart audits performed and interview the supervisor and home visitors on how outcomes are met. Technical Assistance will be provided based on site visit results and site requests. The site will receive in advance a site visit agenda, the template of the site visit evaluation, including what is expected before the date of the site visit. The QA team is still working on this template. We will get with management to discuss a timeline for these site visits.
- b. **Shaken Baby Doll – Robin Qualls:** Goal 4 of the CHVP Semi-Annual Progress Report contains Objectives 4.4 – Child Injury; 4.5 – Child Abuse; and 4.6 – Child Safety. In an effort to assist local programs with discussing these issues during home visits, CHVP has consulted with HFA and NFP-NSO personnel to allow the use of this teaching tool. Local Health Jurisdictions may direct funds in their FY 2013-14 budgets toward the purchase of one Shaken Baby Doll Simulator per site. The dolls can be purchased via the *“Realityworks”* agency at www.realityworks.com (800) 830-1416. CHVP will discuss with management the additional purchase of the *“Period of Purple Crying”* curriculum to use with the Shaken Baby Doll Simulator.
- c. **CHVP Report due Dates and New CHVP Postings:** Because of multiple required CHVP reports with upcoming due dates and new CHVP postings, we thought that it will be easier for everyone to follow if we create a table to keep track of reporting deadlines. We sent an e-mail late last night and today to all of our sites. Please let us know if you did not receive the e-mail so we can re-send. If you have any concerns with any of the postings or difficulty on meeting the deadlines please contact your QA Team so we can discuss and work out some solutions. Just so that everyone is aware, CHVP required reports piggyback to HRSA requirements with a specific deadline. We understand the burden to our sites. We appreciate your understanding about the importance of these requirements. The new



CHVP postings are important for your review. Please use the new staffing and transmittal forms posted on the website. Also, review the new policies posted such as Staffing Requirements (e.g., staff leave of absence; a staffing plan requirement), HIPAA Requirements (how to securely communicate to CHVP when e-mailing PHI information), and Client Support Materials (definition and when these are supposed to be used).

- d. **Data Cleaning:** NFP sites should continue to review the data reports on the NFP side of ETO and correct errors/missing data as quickly as possible. The QA evaluation team members will be contacting sites beginning next week to discuss these data reports. We will be focusing on federal reporting (demographics, service utilization and benchmarks) first. We are all looking forward to assisting and supporting sites in the data cleaning effort. As soon as the ETO Connect problems are resolved, we will have reports for you on data from the CHVP side of ETO. HFA is on hold until TouchPoints is fully operational and all data have been migrated. TouchPoints implementation is going very well which means we will be able to start generating data reports for you very soon and your data cleaning will then begin.
- e. **Systems Survey Due July 12:** We currently have 11 surveys and expect to receive the remaining 12 by tomorrow. Please contact Robin Pleau if you are having difficulty completing the survey. We made it quite short so that we can follow-up in the future with phone calls to illicit more information from you.....thus, lessening your workload.
- f. **Service Provider Survey Due August 15:** This is for federal reporting and is the same format as the previous one you filled out – this one has new dates attached for us to find out if you have additional collaborations in your programs.

IV. Local Level

- a. Mary Hansell presented San Francisco's interaction with the early care and education system in the county. She explained that San Francisco has a Childcare Health Project within MCAH. As NFP children grow, they will be able to have direct referrals by sites to this program. Provider brochures are sent to all of the sites. The Childcare Health Project is staffed by a nurse manager and 4.5 FTE nurses, two health workers and a part-time dental hygienist. Children are seen at preschools, childcare sites



and early care and education sites around San Francisco. The sites are those focused on the highest number of low-income children in San Francisco. The Human Services Agency provides the bulk of the funding. There is also funding from First 5. The staff are seeing children individually and providing health screening and appropriate referrals, and some limited case management. They screen vision, hearing, dental and height and weight. They also do teaching around these screenings. Attention is being paid to early childhood educators. By doing that, they are able to make evident some of the necessary changes for the safety and healthiness of the sites. It requires a strong relationship between staff and childcare sites. Some of the changes that have been instituted include the snacks and meals children are provided, physical activity and using bleach-free cleaning products. NFP children will be graduating into infant toddler programs. Having that connection between PHNs and other staff strengthens that graduation out of home care.

V. Q&A Session

- a. Humboldt wanted to know if the Tri-Consortium would receive three shaken baby dolls. Robin Qualls replied: Yes.
- b. Fresno wanted to know if they need to purchase the doll if they already have one. Robin Qualls replied: No.
- c. Solano County mentioned they give DVDs to the parents to give to anyone who may be watching the infant to educate them about Shaken Baby Syndrome.
- d. San Diego wanted to know if they can increase the time of their MCAH Coordinator. Arlene Silva replied: The FTE minimum is 15 percent. If you think you will need more, we can have a separate discussion to justify a higher percentage.
- e. Riverside wanted to know if they could email the AFA packet. Stephen Fong replied: This year we want you to email it. That way we can go to a centralized place and review it. Once it's ready for signing, then you mail it in.
- f. Contra Costa wanted to know the due date for the semiannual report addendum. Arlene Silva replied: It's really informal. That's why we didn't include it in the table. Just arrange it with whoever is on your QA team.
- g. San Francisco said they have not received their budget template. Stephen Fong replied: If you have not received the budget template, notify your contract manager and we will get it to you.