

## 1.0 LOCAL ACTIVITIES

**1.1 Policy:** The State MCH Branch funds local agencies to conduct ALFP/ASPP programs that serve the needs of pregnant or parenting adolescents and their siblings

### 1.2 Program Requirements

**1.2.1** Each agency will develop and maintain a Standards Implementation Document (SID) (refer to the glossary for definition) that is consistent with the most recent versions of the AFLP/ASPPP Standards and the Scope of Work, and adheres to the format as stipulated in the SID Example (refer to Sample Forms).

1.2.1.1 The SID will be the protocols/policies and procedures by which the agency administers their AFLP and (if applicable) ASPPP.

- The agency must address the rationale, structure, process and when, appropriate, outcome criteria for each program standard.
- Each standard must address who, what, where, when, and how each element within each standard will be met (Refer to SID Example in Sample Forms).
- The SID will reflect current operating practices of the agency and interventions in working with the target population.

1.2.1.2 The SID must be reviewed by the agency on an annual basis and revised as needed by the AFLP/ASPPP Director or a designee of the agency.

1.2.1.3 The Standards Implementation Document (SID) and any subsequent revisions must be submitted to the Maternal and Child Health (MCH) Branch for approval. Submittal must be in accordance with the timeline detailed in the agreement under "Performance Requirements". *Refer to AFLP SOW Page 2*

1.2.1.4 A separate SID must be developed for each program (AFLP and ASPPP).

1.2.1.5 The SID will be available to all staff at each agency site as guidance for the consistent application of policies and procedures.

**Note:** The state assigned Program Consultant will provide technical assistance in developing Standards Implementation Documents for AFLP/ASPPP providers upon request. Program Consultants may refer to the SID document during site visits to the agencies.

**1.2.2** Each agency must develop and maintain a continuous quality assurance (QA) plan that includes oversight and evaluation of program activities and outcomes as outlined in the agency SID.

1.2.2.1 The plan for QA must include, but not be limited to, the following:

- Development of key processes with objectives that insure delivery of quality, safe, and effective case management services for clients in accordance with AFLP and ASPPP standards and SOW
  - These processes will include, but not be limited to the provision of on-going supervision of program activities and review of documentation in client charts
- Evaluation of:
  - Administrative processes used to achieve overall program goals.
  - Case Management process utilized to achieve desired outcomes.
  - Activities completed within the timeframes specified in the SOW and Program Standards
  
- Periodic (no less than annual) review of progress towards achieving desired objectives for quality assurance.

1.2.2.2 In implementing the QA plan, the agency must allocate sufficient supervisory staff time to oversee/provide QA activities

1.2.2.3 The agency's plan and activities for maintaining quality assurance shall be documented in the Standards Implementation Document.

1.2.2.4 The agency shall maintain documentation of quality assurance activities on file at the agency.

1.2.3 Each agency will work with MCH and other State and local agencies to develop a coordinated system of care focusing on adolescent health and teen pregnancy prevention.

1.2.3.1 A coordinated system of care includes the definition, development, integration, and coordination of all systems of care that support and assist AFLP Clients and ASPPP Clients and their families.

1.2.3.2 The agency will coordinate a seamless system of care between AFLP, ASPPP, Cal- Safe, Cal-Learn, Office of Family Planning Teen Pregnancy Prevention Programs and other programs focusing on adolescent health and teen pregnancy prevention.

1.2.4 Each agency will recruit and collaborate with a service network of local providers to assure appropriate and necessary services for clients.

1.2.4.1 Network activities should be conducted on a quarterly basis and documented by the following:

- roster of network participants
- meeting agendas
  - each meeting must address teen pregnancy and/or pregnancy prevention and related issues

- meeting minutes

1.2.4.2 Formal and/or informal agreements should be developed and include the following:

- services to be provided,
- responsibilities of the agencies involved,
- effective dates of the IA/MOU,
- titles or position of staff responsible for carrying out the services,
- signatures of agency administrators from participating agencies,
- provision for periodic review and update,
- copies of the agreement(s) shall be retained in agency files.

1.2.5 AFLP and ASPPP are voluntary programs that require clients' informed consent to participate.

- Each agency must have a completed consent form signed by the client in the client's record stating the agreement to voluntarily participate in AFLP or ASPPP.
- Client consent to participate in AFLP is governed by statutes relative to minor consent for treatment and/or participation in programs for pregnant and/or parenting teens.
- Parental or guardian consent is required for clients participating in ASPPP. If parental or guardian consent cannot be obtained, clients may be eligible to receive case management for services covered under minor consent statutes.

**Note:** See California Family Code Sections 6920 through 6929 and other sections of California Code that address minor consent issues.

1.2.5.1 Each agency will have a signed and dated consent form in the client record. The completed consent form will include:

- Client's Name.
- Signature of the client and/or parent or guardian.
- Date consent was signed
- A statement of the services that will be provided.
- A statement of the agencies responsibilities to the client. (i.e. maintain client confidentiality, monthly client contact, mandatory reporter, etc.)
- Agency's expectation of client's responsibility of participating in program
- Explanation of agency's grievance process and procedures.
- Explanation of clients' right to withdraw.
- A statement indicating that all information on the consent was communicated in the Clients' primary language.

**Note:** Agencies may provide a statement of agency responsibilities to the client as a separate document (e.g. Client Bill of Rights). The agency grievance process and procedures may also be a separate document.

1.2.6 Each agency will maintain confidentiality for clients and client records except as prescribed by law. All client information is considered confidential except in certain, clearly defined circumstances (refer to 1.2.9 Mandatory Reporting).

1.2.6.1 The client record, including all copies, should be kept in a secure location that is inaccessible to unauthorized persons.

1.2.6.2 Prior to release of any client information, each agency will have a release of information in the client record. The release of information must include:

- client's Name,
- client's Signature,
- names of all agencies to which client information may be released,
- time-frames for which release of information is valid
- purpose for release

1.2.6.3 Release of information must be completely filled out before securing client signature.

1.2.7 Each agency will ensure that records are maintained for each client reflecting all services provided and contacts made.

1.2.7.1 A client record shall include, but not be limited to the following:

- consents,
- release of Information,
- assessments,
- all quarterly Individual Service Plans,
- State MIS Data Forms,
- progress notes.

1.2.7.2 The documentation in the client progress notes must include but not be limited to:

- Date, time, place of contact, name of contacted person and affiliation.
- The name and title of the person making the contact.
- Details, including the ongoing assessment, intervention, referrals, follow-up and outcomes.
- Client responses to interventions.

1.2.7.3 Documentation must occur within one week after the client contact.

1.2.7.4 Commonly used abbreviations and acceptable terminology must be defined in the agency Standards Implementation Document.

1.2.8 Each agency shall maintain a system for storage and retrieval of all client records.

1.2.8.1 The client record, including all copies, should be kept in a secure location that is inaccessible to unauthorized persons.

1.2.8.2 The original record may not be removed from the program site until conditions of 1.2.8.3 are met.

1.2.8.3 Client records should be kept for a minimum of three (3) years from the date of final payment under the contract.

1.2.9 Each agency shall have procedures in place that clearly define mandatory reporting requirements for the protection of clients.

1.2.9.1 All reportable incidents (abuse, violence related) covered by these requirements shall be reported to the appropriate local agency.

1.2.9.2 Training on mandatory reporting shall be provided to all staff at orientation and updated as required by law.

- The training shall cover the reporting procedures as dictated by current Federal and State law and regulations and include the following:
  - issues of sexual, physical, emotional, psychological abuse of children;
  - dependent adult abuse;
  - domestic/relationship violence; and
  - access to local systems that address abuse issues.

1.2.10 Each agency will notify the MCH Branch of any unusual incidents or occurrences that may impair/compromise the agency's capacity to deliver services to clients. Notification should include the nature of the reportable incident and a proposed plan for the continuation of services.

1.2.10.1 The program director will notify the MCH Branch Program Consultant and Contract Manager at the earliest opportunity following the occurrence of the incident by telephone and in writing.

1.2.10.2 Occurrences or incidents requiring possible MCH Branch intervention may include but are not limited to the following:

- Damage to the program site such as fire or other destruction.
- Inappropriate or unprofessional behavior by a case manager or other staff to the extent that services are impacted.
- Legal action against the agency.

1.2.11 When an agency is determined to be non-compliant with contract requirements, the agency will receive written notification from the MCH Branch requesting a Corrective Action Plan (CAP) and the MCH Branch may withhold payment of invoices.

1.2.11.1 The Corrective Action Plan will be reviewed by the Program Consultant and discussed with MCH Branch management.

1.2.11.2 If the Corrective Action Plan is accepted, the agency will be notified and payment of invoices will be made in a timely manner.

1.2.11.3 If the Corrective Action Plan is not accepted by the MCH Branch:

- The Branch will identify those areas requiring revision.
- The agency will revise the CAP to include the resolution of the identified issues and resubmit their plan.
- Payment of the invoices may be delayed until a Corrective Action Plan is approved.

1.2.12 An agency may request a waiver of an AFLP/ASPPP requirement and must include the following:

- The nature of the proposal including the circumstances that warrant the waiver.
- Rationale/justification for the proposal and objectives to be accomplished during the waiver period.
- How the waiver will improve/benefit the circumstance/individual
- The anticipated timeline for the waiver period.
- The impact on the program
- The initial request may be submitted by email or fax with formal correspondence to follow.

### **1.3 Procedures**

1.3.1 Submit SID to DHS/MCH for approval

1.3.2 Quality Assurance Plan kept on file for review

1.3.3 Client files to be maintained on-site

1.3.3.1 Files must contain all necessary consent forms and documentation of services provided

1.3.3.2 Client files must remain confidential

1.3.4 Network activities to be documented in program files

1.3.5 Written Corrective Action Plans must be submitted to the MCH Branch within a specified time frame as determined by the state assigned Program Consultant.

1.3.6 Waiver requests must be submitted in writing to the state assigned Program Consultant and Contract Manager.