

Scope of Work (SOW) Adolescent Family Life Program (AFLP)

1. Service Overview

The Contractor agrees to provide to the California Department of Public Health (CDPH) the services in this SOW. As defined in the implementing statute in Health and Safety Code Sections 124175, 124180, and 124185, the purpose of the AFLP is to address the social, medical, educational, and economic consequences of adolescent pregnancy by (1) establishing local networks to provide necessary services to pregnant and parenting teens and their children, and (2) providing case management services focused on achieving the following goals:

- Improve the health of the pregnant and parenting teen, thus supporting the health of the baby
- Improve high school graduation rates for pregnant and parenting teens
- Reduce repeat pregnancies for pregnant and parenting teens, and
- Improve linkages and create networks for pregnant and parenting teens and their child(ren)

The statute also requires the AFLP to assess client needs and refer clients to services including comprehensive prenatal care, medical care, psychological and nutritional counseling, maternity counseling, adoption counseling, academic and vocational programs, day care, and substance abuse prevention, intervention, and counseling. Each AFLP shall also assure program integrity and maintain a data base to measure outcomes.

The AFLP program is part of the CDPH Center for Family Health Division's (CFHD) strategy to achieve the following Division priorities identified by the federally required Title V, 5-year Needs Assessment for the adolescent pregnant and parenting population the AFLP serves:

- Improve maternal health by optimizing the health and well-being of girls and women across the life course.
- Promote healthy nutrition and physical activity among Maternal, Child, and Adolescent Health (MCAH) populations throughout the lifespan beginning with exclusive breastfeeding of infants to six months of age.
- Reduce maternal morbidity and mortality and the increasing disparity in maternal health outcomes.
- Reduce infant mortality and address disparities by promoting preconception health and health care and by preventing causes such as birth defects, low birth weight/prematurity, Sudden Infant Death Syndrome (SIDS), and maternal complications in pregnancy.
- Support the physical, socio-emotional, and cognitive development of children, including the prevention of injuries, through the implementation of prevention, early identification and intervention strategies.
- Promote positive youth development strategies to support the physical, mental, sexual and reproductive health of adolescents.
- Link the MCAH population to needed medical, mental, social, dental, and community services to promote equity in access to quality services.

The development of this SOW was also guided by the three core public health functions of assessment, policy development, and assurance, the Ten Essential Services of Public Health, the Spectrum of Prevention, the Life Course Perspective, the Socioecological Model, and the Social Determinants of Health.

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AFLPs are also required to comply with requirements stated in the [AFLP Program Policies and Procedures Manual](#) and the [MCAH Fiscal Policies and Procedures Manual](#) such as attending statewide meetings, submitting Agreement Funding Applications, submitting timely invoices and Lodestar data, and completing Annual and Quarterly Reports. Copies of manuals will be provided or posted on the CDPH website.

All activities in this SOW must take place within the fiscal year. The measures marked with * will be calculated by Branagh Information Group from Lodestar data in a Scope of Work report from data in Lodestar data forms, which include Intake, Status Change, Follow Up Form, Service Matrix, Additional Outcomes, Pregnancy Outcome, Freecode Forms. It is essential that local agency staff complete these forms accurately and completely.

2. Service Location(s)

The services shall be performed at various Agencies throughout California.

3. Service Hours

The services shall be provided during normal Agency working hours, excluding holidays.

4. Project Representatives

The AFLP representatives and contacts during the term of this agreement will be:

California Department of Public Health Maternal, Child and Adolescent Health Division Program Allocations, Integrity and Support Branch Contract Manager: 1615 Capitol Avenue, MS 8305 PO Box 997420 Sacramento, CA 95899-7420 Telephone: Fax:	Agency Name: Agency Contact: Agency Address: City, State, Zip: Telephone: Fax: Email:
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Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.

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5. SOW Changes

- A. Pursuant to Health and Safety code Section 38077(b) (2), changes and revisions to the SOW contained in the agreement, utilizing the "Allowable cost payment system" may be proposed by the Contractor in writing. Failure to notify the State of proposed revisions to the SOW may result in an audit finding.
- B. The State will respond, in writing, as to the approval or disapproval of all such requests for changes or revisions to the SOW within 30 calendar days of the date the request is first received in the Department. Should the State fail to respond to the Contractor's request within 30 calendar days of receipt, the Contractor's request may be deemed approved.
- C. The State may also request changes and revisions to the SOW. The State will make a good-faith effort to provide the Contractor 30 calendar days advance written notice of said changes or revisions.
- D. No changes to the SOW agreed to pursuant to this paragraph shall take effect until the cooperative agreement is amended and the amendment is approved as required by law and this agreement.

6. Performance Requirements

- A. In accordance with AFLP Standards, AFLP Local Agency will provide, at a minimum, the following case management Months of Service (MOS) to eligible adolescents and their children for fiscal year(s):

_____ AFLP MOS (___ clients) for the budget period of 07/01/12 through 06/30/13
_____ AFLP MOS (___ clients) for the budget period of 07/01/13 through 06/30/14
_____ AFLP MOS (___ clients) for the budget period of 07/01/14 through 06/30/15

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- B. For each fiscal year of the contract period, the Local Agency shall submit the deliverables identified below. With the exception of the Management Information System (MIS) Data, the LodeStar program, all deliverables shall be submitted to the MCAH Division in accordance with the AFLP Policies and Procedures Manual and postmarked no later than the due date. The LodeStar Data must be submitted to the current MIS contractor or MCAH Program Consultant by the date specified below.

Deliverables for each FY

Due Date for each FY

Annual Progress Report

Aug. 15

Quarterly Report:

Cover Sheet

Oct. 31, Jan. 31, Apr. 30, July 31

MOS **Quarterly** Report

Oct. 31, Jan. 31, Apr. 30, July 31

Caseload Analysis

Oct. 31, Jan. 31, Apr. 30, July 31

Personnel List

Oct. 31, Jan. 31, Apr. 30, July 31

MIS Data (content of previous month)

7th and/or 17th of each month for electronic submission

- 7. See the following pages for a detailed description of the services to be performed.**

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Goal 1: Improve linkages and create networks for pregnant and parenting teens and their children

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures to be Reported in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures
1.1 AFLP will assess local needs, and develop and maintain a comprehensive, culturally appropriate local network of teen friendly supportive services	1.1.1 Identify and monitor local trends in teen pregnancy and parenting outcomes, including disparities, and social determinants.	1.1.1 List and briefly describe local trends in teen pregnancy and parenting outcomes, including disparities and social determinants.	Not Applicable
	1.1.2 Identify and monitor local geographic areas or population groups that have insufficient access to health and human services for pregnant and parenting teens. Identify high risk groups and areas.	1.1.2 List and briefly describe: <ul style="list-style-type: none"> • Geographic areas or population groups that have insufficient access to health and human services for pregnant and parenting teens. • Any activities that have specifically addressed these gaps and the associated outcomes. 	Not Applicable
	1.1.3 Identify community agencies and other service providers for pregnant and parenting teens and work toward developing documented agreements (e.g., MOUs, letters of support or agreement) for referral with at least the following: <ul style="list-style-type: none"> • Local MCAH Program (for CBOs) • Family PACT providers • CPSP providers • WIC • Cal Learn • Cal SAFE 	1.1.3 a. Complete the table in the Annual Report to describe services available to clients and type of agreement for referral. b. Describe the relationship with the local MCAH program c. Describe venues where case management services are delivered to clients, address of offices, and d. model of service delivery (group, individual, face to face, telephone, combination) (500 word limit)	1.1.3 Summarize: <ol style="list-style-type: none"> a. service gaps and changes in the provider network during the reporting period. b. the impact on the AFLP population c. key challenges and strategies to address the gaps and challenges.

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		Process Measures	Outcome Measures
Continued from previous page	<ul style="list-style-type: none"> • Primary care providers • Child care and development services • Local schools or education services, including migrant education where appropriate <p>Other resources could include:</p> <ul style="list-style-type: none"> • Psychological counseling • Social services • Vocational programs • Emergency support • Housing • Legal Assistance • Substance Abuse Prevention • Adoption Counseling • Parenting Classes • Home Visiting Programs 	Continued from previous page	Continued from previous page

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Goal 1: Improve linkages and create networks for pregnant and parenting teens and their children

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures to be Reported in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures
1.2 Improve local systems of care through collaboration designed to establish, sustain and enhance comprehensive systems of care for pregnant and parenting teens and their children.	1.2 Participate in at least one collaborative, coalition, network, etc., that develops products or strategies that address unmet needs and promote increased local access to health and human services for pregnant and parenting teens and their children.	1.2 Submit Collaborative Form to document participation in at least one and not more than 3 AFLP collaboratives or coalitions that address unmet needs and improve access to health and human services: Maintain records of collaboration in AFLP Agency (i.e. network coordination documentation, summaries, and/or minutes of meetings attended).	1.2 Collaborative Form submitted in Process will a. Document objectives and accomplishments and b. Include a description of the collaborative's impact on the local system of care for pregnant and parenting teens. c. List products developed and outcomes of dissemination on collaborative form.
1.3 Improve community knowledge of AFLP services and identify potential clients by conducting outreach activities.	1.3 AFLP will conduct outreach activities to high risk groups, areas, and community agencies and other service providers to ensure that appropriate and eligible clients are identified, referred to the program and enrolled or placed on a waiting list, or referred to other community services.	1.3 Describe: a. outreach activities b. State number of clients on current waiting list c. describe the process of referrals for clients that are not appropriate for AFLP d. challenges	1.3 State the number and percent of clients completing intake by source of referral in MIS Scope of Work Report.

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Goal 1: Improve linkages and create networks for pregnant and parenting teens and their children

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures to be Reported in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures
1.4 Clients will obtain health insurance.	1.4 Make referrals and assist clients to enroll in Medi-Cal, Access for Infants and Mothers (AIM) and other low cost/no cost health insurance programs for health care coverage.	1.4 Provide the number of clients and their children receiving referrals to Medi-Cal.**	1.4 Report: a. Number and percent of adolescent clients with health insurance at intake* b. Number and percent of adolescent clients with health insurance at last follow up* c. Number and percent of index children with Medi-Cal *
1.5 Client will access needed services for herself and her child.	1.5 Case Managers (CMs) will work with clients to assure that clients and children receive linkages to services. CMs will educate client to understand the importance of well child visits and immunizations.	Not Applicable	1.5 Report the following: a. Percent of clients and index children who needed and received services** b. Attach the Service Referral Analysis Report
1.6 Client will develop a supportive relationship with a stable, caring adult outside of AFLP.	1.6 CMs will encourage clients to identify a stable, caring adult outside of AFLP. This could include improving relationships with parents, involvement with community groups or faith communities, or educational institutions.	1.6 a. Describe the process to incorporate this objective into case management activities and b. List the challenges and successes in achieving this objective.	1.6 Report the number and percent of clients who self-report that they have a supportive relationship with a caring adult outside of AFLP. (In development for future reporting)

*MIS Scope of Work Report
**Service Referral Analysis Report

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Goal 2: Improve the health of the pregnant or parenting teen, thus also supporting the health of the index child

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
2.1 Clients will have healthy nutrition and healthy weight.	2.1 Refer to WIC and follow up to encourage linkage. Refer to CPSP provider if pregnant and reinforce healthy diet/weight gain. Assist client to develop a goal to achieve or maintain a healthy weight. Program policies and activities, including case management activities, will promote and model healthy diet and reinforce healthy nutrition.	2.1 List key activities used to promote healthy nutrition and healthy weight	2.1 Report number and percent of clients receiving WIC.
2.2 Clients will engage in daily physical activity.	2.2 Encourage physical activity daily, at least one hour four times a week, or as allowed by MD if pregnant. Program policies and activities, including case management activities, will promote and model regular and frequent physical activity.	2.2 List key activities used to promote physical activity.	2.2 Report the number and percent of: a. clients with any physical activity b. for those clients that report any physical activity, report the average days of physical activity per week
2.3 Pregnant clients will receive timely prenatal care in order to maximize their health and deliver a healthy baby.	2.3 Refer to prenatal provider, use CPSP provider when available. Identify and address barriers to keeping appointments.	2.3 Describe success/challenges in linking to CPSP and other prenatal providers.	2.3 Report the number and percent of clients pregnant at enrollment who: a. Received prenatal care* b. Had a LBW baby (<2500g)* c. Had a pre-term baby (<37 wks)* d. Had an LGA baby (>4000g or 8#-13oz.)*

¹ MIS Scope of Work Report

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Goal 2: Improve the health of the pregnant or parenting teen, thus also supporting the health of the index child

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
2.4 Clients will initiate and continue breastfeeding.	2.4 Encourage breastfeeding.	2.4 List activities used to promote breastfeeding.	2.4 a. Report number and percent of clients who did any breastfeeding . b. Report number and percent of clients planning to breastfeed if pregnant at intake*.
2.5 Clients will not use tobacco.	2.5 Assess each client for tobacco use using self-report and/or validated screening tool. Advise to quit or decrease tobacco use. Refer to tobacco quit line, other treatment as appropriate.	2.5 Briefly describe activities to screen and refer clients to tobacco cessation.	2.5 a. Report number and percent of clients who were smoking at intake.* b. Report the number and percent of clients who were smoking at last follow up.*
2.6 Clients will not use alcohol or other drugs.	2.6 Assess each client for alcohol or other drug use using self-report and/or validated screening tool. Advise to quit or decrease alcohol or other drug use. Refer to treatment for alcohol or other drug use.	2.6 Describe key challenges related to alcohol or other drug use among clients.	2.6 Report number and percent of clients who: a. Admit use of alcohol in the 6 months before intake* b. Admit use of alcohol in the 6 months before last follow up* c. Admit use of drugs in the 6 months before intake* d. Admit use of drugs in the 6 months before last follow up*

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Goal 2: Improve the health of the pregnant or parenting teen, thus also supporting the health of the index child

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
2.7 Non pregnant clients will receive primary preventive health care.	<p>2.7 Discuss with each client the importance of receiving primary preventive health care to prevent illness and identify and address health conditions early (for example, STIs, chronic conditions, pregnancy related conditions).</p> <p>Educate clients about importance of chlamydia screening (per CDC rec to annually screen all youth \leq 25) and encourage to request testing by provider.</p> <p>Identify and address barriers to clients receiving primary preventive health care.</p>	2.7 Briefly describe successes and challenges in clients obtaining primary preventive care.	2.7 Report the number and percent of clients who received primary preventive health care.
2.8 Clients will demonstrate knowledge of normal child development and appropriate parenting skills.	<p>2.8 Observe client/child interactions. Provide child development and parenting education. This could include use of validated early childhood developmental screening tools (e.g. ASQ, ASQ SE) and must include identification of a source of preventive and primary care for the client and her child. Provide anticipatory guidance and education regarding importance of developmental screening and well child visits.</p> <p>Model appropriate parenting skills and refer to parenting classes or</p>	2.8 State how AFLP agency implements objective. Identify assessments or other curricula used and usual types of referrals. Discuss referrals made to improve knowledge of child development and appropriate parenting skills.**	2.8 Attach the Service Referral Analysis Report.

^{*} MIS Scope of Work Report
^{**} Service Referral Analysis Report

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Goal 2: Improve the health of the pregnant or parenting teen, thus also supporting the health of the index child

Outcome Objective(s)	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
Continued from previous page	other resources.	Continued from previous page	Continued from previous page

**Scope of Work (SOW)
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Goal 3: Improve high school graduation rates for pregnant and parenting teens.

Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
3.1 All clients will set and achieve a goal to complete high school or equivalent.	3.1 Case managers will work with all clients to develop and execute a plan for the client to complete high school or the equivalent. CM will communicate with school staff responsible for tracking the client's academic progress (e.g. high school counselor, special education teacher, or migrant education program) routinely, at least biannually and note in Individual Service Plan (ISP). Identify and address barriers to attending and completing high school.	3.1 List and briefly describe the top three barriers to clients completing high school and strategies to address barriers.	3.1 Report the number, percent and total clients who: a. Are attending school or have graduated or the equivalent [†] b. Have an educational goal *
3.2 Parenting Clients will have a reliable source of quality child care to enable them to attend school.	3.2 CM will help client identify and address barriers to obtaining reliable, high quality child care.	3.2 List and briefly describe the top three barriers to clients obtaining child care and strategies to address.	3.2 Report number and percent of clients not in school because of child care barrier*
3.3 Clients will have reliable transportation to school.	3.3 CM will help client to identify and address barriers to obtaining reliable transportation to school.	3.3 List and describe the top three barriers to clients having transportation to school and strategies to address these barriers.	3.3 Report number and percent of clients not attending school because of transportation barrier.*
3.4 Clients who have graduated from high school will enroll in postsecondary education or vocational	3.4 CM will assist clients to develop and execute a plan for postsecondary education or training or employment (see next objective) after high school	3.4 List and describe the top three barriers to clients enrolling in postsecondary education or training and strategies to address these barriers. Identify	3.4 Report the number and percent of clients who have graduated high school that are enrolled in postsecondary education or vocational training.

[†] MIS Scope of Work Report

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Goal 3: Improve high school graduation rates for pregnant and parenting teens.

Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
training or will be employed.	completion.	opportunities for policy development, program planning and collaboration.	Continued from previous page
3.5 Clients who have graduated from high school and are not enrolled in postsecondary education training will be employed.	3.5 CM will assist clients who do not wish to pursue postsecondary education or training to develop and execute a plan to obtain employment after high school completion.	3.5 List and describe the top three barriers to clients obtaining employment and strategies to address these barriers. Identify opportunities for policy development, program planning and collaboration.	3.5 Report the number and percent of clients who have graduated high school and are employed.

MIS Scope of Work Report

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Goal 4: Reduce repeat pregnancies in pregnant and parenting teens.

Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
<p>4.1 Clients who are not pregnant and are sexually active will:</p> <ul style="list-style-type: none"> • Always use contraception, • Use long acting contraceptives • Not have a repeat pregnancy while in the program. • Use condoms to prevent STIs 	<p>4.1 Refer to Family PACT/ primary care provider.</p> <p>Identify and address barriers to correct and consistent use of contraception.</p> <p>Encourage clients to use long acting contraceptives</p> <p>Document client pregnancies Encourage clients to use condoms to prevent STIs.</p> <p>Educate on family planning as possible within the scope of training and licensure of the CM.</p>	<p>4.1 Describe the top three barriers to clients using contraception and strategies to address these barriers.</p>	<p>4.1 Report Number and Percent of sexually active non-pregnant clients who:</p> <ul style="list-style-type: none"> a. are always using contraception* b. are using long acting contraceptives (6- IUD,7- implant)* <p>Report number and percent of sexually active clients who:</p> <ul style="list-style-type: none"> c. had a repeat birth while in the program (all female clients)* d. are using condoms* e. are using condoms with another contraceptive method *
<p>4.2 Clients will verbalize characteristics of healthy relationships and how to recognize and respond to reproductive coercion and birth control sabotage (RC/BCS).</p>	<p>4.2 AFLP will integrate information about RC/BCS into the SID and train CMs to provide information to clients.</p> <p>Screen clients for RC/BCS.</p> <p>Provide resources (Safety cards, Web sites) on recognizing and addressing this.</p> <p>Refer clients to providers to obtain coercion resistant birth control methods and counseling. Provide emotional support</p> <p>Maintain and train on local policy</p>	<p>4.2 a. Report number and percent of clients who received information on reproductive coercion and birth control sabotage. *</p> <p>Describe process to integrate information on reproductive coercion and birth control sabotage into case management.</p> <p>b. Report number and percent of clients referred for "coercion resistant" birth control methods and counseling.*</p> <p>Provide compelling anecdotal stories when available.</p>	<p>4.2 a. Report number and percent of clients who state they feel safe in their relationship with their partner/other parent at intake.*</p> <p>b. Report number and percent of clients who state they feel safe in their relationship with their partner/other parent at last follow up.*</p>

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Goal 4: Reduce repeat pregnancies in pregnant and parenting teens.

Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
Continued from previous page	and procedure for mandatory reporters.	Continued from previous page	Continued from previous page

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Goal 5: AFLP will maintain program and fiscal management capability to administer the program as required by the AFLP Program Policies, Procedures and Scope of Work and will assure staff competency, program integrity, and data completeness.

Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
5.1 AFLP will maintain program and fiscal management capability and will demonstrate that it is conducting AFLP activities as required in the AFLP Policies and Procedures, SOW and Program and Fiscal Policies and Procedures.	5.1 <ul style="list-style-type: none"> • Annually review, revise and enhance internal policies and procedures for delivering services to clients to prioritize the highest risk clients (Entry Criteria). • Meet the MOS. • AFLP will maintain a client to case manager ratio of no more than 50 clients per case manager. • Submit AFA and Annual Report timely. • Collect and input monthly Follow Up, Service Matrix and Additional Outcomes forms that are due. 	5.1 <ol style="list-style-type: none"> a. Submit Entry Criteria b. discuss risk rating factors used c. discuss successes and challenges in meeting or exceeding MOS d. complete the staffing profile in Annual Report e. complete the client profile in the Annual Report f. state criteria for program completion/exit g. state top three reasons for client exit h. state common linkages to other programs or services for clients exiting the program 	5.1 <ol style="list-style-type: none"> a. Report number of clients and MOS for the year along with percent of allocation delivered (MOS and Caseload Analysis Report).* b. Submit the MOS and Caseload Analysis Report and AFLP Personnel List quarterly. * c. Report the percent of clients who have completed Follow Up Forms by the time the index child is six months old* d. Report the percent of clients who have Service Matrix and Additional Outcome forms with the most recent Follow Up Form. *
5.2 AFLP will maintain and increase staff competency	5.2 <ol style="list-style-type: none"> a. Identify staff training needs b. Provide or support staff training c. AFLP Director will attend statewide meetings. d. If they have not done so already, AFLP Director will conduct self-assessment of Core Competencies for Providers of Adolescent Sexual and Reproductive Health using the ASHWG (CA Adolescent Sexual Health Workgroup) tools and require 	5.2 <ol style="list-style-type: none"> a. List gaps in core competencies identified and trainings and professional development for AFLP staff to address these gaps and other training needs. b. Describe the plan for conducting ASHWG core competency assessment for case managers 	5.2 <ol style="list-style-type: none"> a. Describe the outcome of the training evaluation.

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Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
Continued from previous page	<p>supervisory staff and case managers to do so.</p> <p>e. Staff who have completed the self-assessment will develop and implement a plan to improve their skills and document progress annually</p> <p>f. Develop training for CM</p>	Continued from previous page	Continued from previous page
<p>5.3 AFLP director will assure that CMs conduct intake, comprehensive baseline assessment, develop an Individual Service plan, provide appropriate referrals, and conduct other elements of case management defined in the Standards, Policies and Procedures.</p>	<p>5.3 AFLP will conduct monitoring and evaluation of client documentation for:</p> <ul style="list-style-type: none"> • Comprehensive Baseline Assessment within 60 days of consent—includes HV. • Individual Service Plan within 60 days of consent • monthly face to face client contact • Quarterly Home Visit • quarterly contact with collaterals (i.e. parents, teachers, counselors) and service providers; • identification of barriers to services and emerging or changing client needs, • evaluation of client use of services using feedback from client, collateral, and service providers. • Quarterly client reassessment and update and revision, if needed, of service plans 	<p>5.3 State number and percent of clients that:</p> <ul style="list-style-type: none"> a. received a Comprehensive Baseline Assessment (CBA) within 60 days of enrollment b. received a Home Visit within 60 days of enrollment* c. received monthly face to face contact* d. had an Individual Service Plan (ISP) within sixty days of enrollment e. case manager made quarterly contact with collaterals or service providers.* f. received a reassessment subsequent to the initial assessment.* g. received a case review to assure compliance with AFLP Standards, Policies and 	<p>5.3 Describe the outcome of the QI plan</p>

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Goal 5: AFLP will maintain program and fiscal management capability to administer the program as required by the AFLP Program Policies, Procedures and Scope of Work and will assure staff competency, program integrity, and data completeness.

Outcome Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures Report items below in the Annual Report or more frequently where indicated	
		Process Measures	Outcome Measures (Forms)
Continued from previous page	Monitor above measures in a quarterly random sample of 25 charts or 10%, whichever is lower, and routinely implement QI activities to address measures not meeting the standard. Consider addressing one deficient measure per quarter.	Procedures (narrative). i. State what opportunities are currently available for staff to meet and share successes, identify challenges and strategize around solutions. j. state how frequently opportunities identified in i. are available Refer to the MIS SOW Report or the MIS Client Contact Summary Report Briefly describe QI activities and which standard(s) have been addressed.	Continued from previous page

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Goal 6: To support pregnant and parenting teens at high schools and community service centers to implement the AFLP Positive Youth Development intervention. (Only for AFLP-PYD agencies)

Outcome Objectives	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures to be Reported in the Annual Report or semi-annually where indicated	
		Process Measures	Outcome Measures
6.1 Address internal agency conditions and external factors that affect youth-serving partnerships with schools and community.	6.1.1 Continue to update strategic plan based on guidelines provided by State MCAH. The strategic plan will address the youth serving programs and systems that provide client linkages to community support.	6.1.1 Strategic plan updated by agencies.	6.1.1 Submit a progress report related to activities and goals identified in the strategic plan.
6.2 Assure baseline knowledge and skills necessary to work with pregnant and parenting teens and support the implementation of the standardized case management intervention with integrated life planning.	6.2.1 AFLP managers, supervisors, and CMs will participate in trainings that support the key concepts and content areas of the AFLP PYD intervention.	6.2.1 Training attendance list.	6.2.1 Following each training, 80% of the AFLP managers, supervisors and CMs will demonstrate increased knowledge related to training topics based on a retrospective pre/post evaluation.
6.3 Inform the development and effective implementation of the standardized case management intervention with integrated life planning.	6.3.1 Participate in state sponsored site visits.	6.3.1 Submit information to State MCAH as appropriate and assist State MCAH staff to summarize and integrate findings. Maintain documentation onsite.	6.3.1 Pilot and implement the revised, standardized intervention.
	6.3.2 Participate in conference calls, focus groups, regional meetings, surveys and work groups to inform the development, implementation, and	6.3.2 Submit information to State MCAH as appropriate and assist State MCAH staff to summarize and integrate findings.	6.3.2 Pilot and implement the revised, standardized intervention.

**Scope of Work (SOW)
Adolescent Family Life Program (AFLP)**

Goal 6: To support pregnant and parenting teens at high schools and community service centers to implement the AFLP Positive Youth Development intervention. (Only for AFLP-PYD agencies)

Outcome Objectives	Intervention Activities to Meet Objectives	Evaluation/Performance Measures Short, Intermediate, and Long Term Measures to be Reported in the Annual Report or semi-annually where indicated	
		Process Measures	Outcome Measures
Continued from previous page	resolution of challenges of the AFLP intervention. Participate in development of AFLP program standards.	Continued from previous page	Continued from previous page
6.4 Ensure a quality intervention with program fidelity and Continuous Quality Improvement (CQI) as the standards for the intervention are developed.	6.4.1 Work with State MCAH to develop a CQI plan to evaluate and monitor the implementation of the standardized case management intervention with integrated life planning. These activities may include participating in focus groups, site visits, and use of CQI tools developed by State MCAH.	6.4.1 CQI plan will be developed and implemented.	6.4.1 Agencies will report on the outcomes of CQI activities and indicate how gaps will be addressed.
6.5 To provide clients with public health messages using electronic media.	6.5.1 Distribute to teens publications and accompanying collaterals for text messaging campaign from Internet Sexuality Information Services (ISIS).	6.5.1 Number of referrals to text messaging.	6.5.1 Number of text messages by area code. This information will be reported by ISIS.
6.6 To comply with required reporting requirements.	6.6.1 Complete annual report using format provided by state MCAH.	6.6.1 Develop plan to maintain records for reporting on SOW.	6.6.1 Complete annual report.