PURPOSE
The purpose of this policy is to highlight protocol for the California Home Visiting Program (CHVP) Maximum Caseload Capacity (MCC) Performance Improvement Plan (PIP). The PIP will be utilized as a key component to ensure MCC levels are sustained. Implementation of this policy will assist CHVP in ensuring compliance with model fidelity and maximizing the number of served families.

POLICY
All sites are required to meet MCC in order to demonstrate a stable home visiting program and maximized funding levels. As delineated in the CHVP Scope of Work (SOW) and CHVP contract, it is the expectation of CHVP that all sites maintain at least 85% of their negotiated MCC.

When a local implementing agency (LIA) falls below 85% of MCC for three consecutive months, the assigned Program Consultant (PC) will initiate a PIP.

PROCEDURE
On a monthly basis, PCs will review caseload reports for each site. LIAs who have fallen below 85% MCC for three consecutive months will work jointly with the PC to create a PIP.

The PIP Form contains a SMART Expectation and monthly tracking goals towards improving caseload capacity. On a monthly basis, the LIA and PC will discuss progress on the PIP until caseload capacity has reached at least 85% MCC for a minimum of one month. Reaching 85% of MCC concludes the PIP process.

DEFINITIONS
Maximum Caseload Capacity – This is the maximum number of cases the LIA is expected to sustain considering the number of funded home visitors and expected attrition. The MCC is negotiated between CHVP and the funded LIA.

REFERENCES
- CHVP Active Caseload Reports
- Performance Improvement Plan (PIP) Form