PURPOSE
To ensure that the California Home Visiting Program (CHVP) hires and retains local CHVP staff according to Nurse Family Partnership (NFP) and Healthy Families America (HFA) home visiting model fidelity.

POLICY
Local CHVP sites must adhere to staffing positions consistent with the NFP National Service Office and the HFA National Office requirements, as well as CHVP Scope of Work (SOW) requirements in regards to hiring, training and/or retention of staff.

PROCEDURE
The following are Staffing expectations for local CHVP sites to ensure proper program implementation:

I. Maternal Child Adolescent Health (MCAH) Director:
   A. The CHVP Scope of Work (SOW) specifies the responsibilities of the MCAH Director, or a designee, regarding percentage of effort dedicated to CHVP or full-time equivalent (FTE) requirements, program support and guidance, local early childhood systems involvement, program hiring requirements, and policy development and maintenance. Please refer to the CHVP SOW for more information regarding the MCAH Director’s role in CHVP.

   B. For HFA programs: The MCAH Director may act as the Program Manager (PM) provided no less than 0.5 FTE is dedicated to the PM position. The percentage of effort for both positions will be specified in the Staffing Report.

II. NFP programs will employ: A nurse supervisor, a minimum of four FTE public health nurses (PHNs) or home visitors and an administrative assistant per NFP Model Elements 8-14. Any other staff or support staff needed must be approved by CHVP.

   A. NFP Nurse Supervisor
      1. Minimum Qualifications: Bachelor’s degree in Nursing, current registered nurse license. Preferred, but not required: Master’s degree in nursing or closely related field; three to five years of experience as a nursing supervisor; and a Public Health Nurse certification.

      2. Responsibilities: Report directly to the MCAH Director or designee. Nurse supervisors provide PHNs with clinical supervision and weekly one-to-one reflective practice sessions for one hour in duration. Case conferences are held twice a month for one-and-a-half to two hours per case conference, alternating with one-hour team meetings held for administrative purposes, implementation issues and team building, consequently there is one team meeting each week. The staffing ratio is one FTE supervisor to no less
III. HFA Programs will employ: a Program Manager, a Supervisor, Family Assessment Workers (FAWs) and Family Support Workers (FSWs) per HFA Best Practice Standards (BPS) Critical Elements 8-12. Any other staff or support staff needed must be approved by CHVP.

A. Program Manager
1. **Minimum Qualifications:** Master's degree in a public health, human services administration or fields related to working with children and families or Bachelor's degree in health science, behavior science or a related field, with three years of administrative experience in quality assurance/improvement and program development.

2. **Responsibilities:** Report directly to the MCAH Director or designee. Oversee program operations, funding, quality assurance, evaluation and supervision of staff. Develop and implement policies and procedures related to the local CHVP site. Serve as the liaison with the CHVP Program Consultant, attending meetings at designated times. Ensure accreditation and program standards are met as described in CHVP Policies and Procedures and HFA BPS. Establish and maintain agreements and effective partnerships with home-visiting-related partner agencies and medical providers. Ensure that HFA and CHVP required trainings are completed by the HFA Supervisor, FSWs and FAWs within six months of hire. Provide regular and ongoing reflective supervision, at a minimum, one hour every 30 days to the HFA Supervisor.

B. Supervisor

1. **Minimum Qualifications:** Master's degree in human services or fields related to working with children and families, or Bachelor's degree in health science, behavior science or a related field with three years of experience working in a public health or community-related setting in the clinical field and in supervising health professionals and managing programs.

2. **Responsibilities:** Full-time supervisors must have six or fewer direct services staff. Spend a minimum of one-and-a-half to two hours per employee each week on formal supervision using a reflective model of supervision to facilitate professional development. Allow time to shadow the FSW and FAW to monitor and assess their performance and provide constructive feedback and reflection. Facilitate the completion of all HFA and CHVP required trainings within six months of FAW and FSW staff being hired.

C. Family Assessment Worker (FAW) and Family Support Worker (FSW)

1. **Minimum Qualifications:** High school diploma or GED (Associate degree or Bachelor degree preferred); experience providing services to children or families and working with participants in culturally diverse community settings; knowledge of infant and child development (infant mental health endorsement level I or II preferred); open to reflective practice and the ability to establish rapport easily; outgoing, friendly, non-judgmental, confident and assertive.

   a. **Responsibilities (FAW):** Conduct outreach and relationship building in the community. Conduct the HFA Parent Survey
assessment and complete the assessment narrative in accordance with site policy and in alignment with HFA BPS 2-2A. Document and enter assessment data in the CHVP data system. Provide pertinent assessment findings to assigned FSW utilizing positive methods that build trust, engage families and maintain family involvement, ideally within 7 working days. Refer ineligible families to appropriate resources based on assessment. Participate in HFA and CHVP required trainings.

b. **Responsibilities (FSW):** Conduct home visits according to service level. Facilitate the parent-child relationship. Observe and listen to parental concerns. Respect family values and culture. Support parents in their role as advocates for themselves and their children. Promote positive child growth and development. Provide appropriate referrals to community resources. Document the services provided to the family to facilitate quality case management. Full-time staff carries a caseload of no more than 25 families or a weighted caseload of no more than 30 points. Caseload may be reduced according to an FSW’s FTE ratio if they are not working full-time; to benefit families with multiple needs; or to accommodate communities in which there are long distances between home visits.

IV. **CHVP NFP and HFA Staffing Requirements:**

A. CHVP reserves the rights to approve or disapprove changes in key personnel positions that occur after funding awards are made.

B. CHVP reserves the right to request additional information, justification or a staff development plan to fulfill staffing and training requirements as outlined below, in addition to the NFP or HFA model.

C. In order to ensure adequate funding of all contract deliverables, CHVP reserves the right to require the local CHVP site to reduce or eliminate any staffing position(s) in excess of the minimum required staffing pattern as identified in the model or CHVP requirements.

D. Within seven working days, local CHVP sites will report to the assigned CHVP Program Consultant the following, along with plans for addressing these changes:
   1. Any changes in staffing or personnel.
   2. Increase or reduction in percentage of effort (FTE) dedicated by staff.
   3. Staff member’s leave of absence of more than one month.
   4. The names of past staff members whose ETO accounts must be deleted and names of new staff members who need ETO accounts created (copy to CHVPDataHelp@cdph.ca.gov ).
REFERENCES

- NFP Model Elements 8 - 14
- HFA Best Practice Standards Critical Elements 8-12
- CHVP SOW Goal 1