

# Maternal, Infant, Early Childhood Home Visiting (MIECHV) Program

## Scope of Services (FY 2021)

Contractor	City of Hampton	
Contract Amount	\$ 406,486	
Contract Period	September 30, 2020 through September 29, 2021	
Scope of Service	Description	Deliverable
A. Service Delivery: Evidence-Based Home Visiting (EBHV) Model services	<ol style="list-style-type: none"> <li>1) Provide Parents As Teachers program services to 110 families in the City of Hampton in accordance with Model standards for program implementation               <ol style="list-style-type: none"> <li>a) Local programs are required to meet and maintain 85% to 100% caseload capacity when no exceptions exist. For those programs that have been on improvement plans to meet caseload capacity in FY2020-2021 and are not able to maintain capacity, the Virginia Department of Health (VDH) may withdraw funding from the local agency. The state MIECHV team will work with the program to provide technical assistance in order to meet HRSA caseload requirements.</li> <li>b) If, after implementing an improvement plan, the program cannot maintain 85% caseload capacity, then the local agency may be placed on probation and evaluated for continued funding.</li> <li>c) These are the only allowable reasons a Site may fall below the 85% threshold                   <ol style="list-style-type: none"> <li>i) Vacant Home Visitor position(s)</li> <li>ii) Home Visitor on extended leave</li> <li>iii) New Home Visitor with &lt;6 months- 1 year employment</li> <li>iv) Demonstrated high percentage (&gt;75%) of families on caseload requiring and routinely receiving weekly visits</li> </ol> </li> </ol> </li> <li>2) Inform VDH/MIECHV of changes in project staffing, significant issues impacting implementation on a monthly basis.</li> <li>3) Maintain all required standards for Model affiliation.</li> <li>4) Remain in good standing with the state model office;               <ol style="list-style-type: none"> <li>a) Actively engage in quality assurance and credentialing activities;</li> <li>b) Work cooperatively with technical assistance consultants.</li> </ol> </li> <li>5) Submit copies of program annual reports and/or model accreditation reports to VDH.</li> </ol>	<ol style="list-style-type: none"> <li>1) The Parents As Teachers program in City of Hampton will use MIECHV funds to serve 110 families, defined as the caseload capacity, or the number of families the program can serve at any given point in time based on the number of full time home visitor employees (FTE).</li> </ol>

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<b>B. Data/ Evaluation</b>	<ol style="list-style-type: none"><li>1) Implement the MIECHV approved client consent process for data sharing with Departments of Health and Social Services.</li><li>2) The grantee is expected to work with VDH on an ongoing basis throughout the grant period to meet the federal grant requirements for defined performance measures for each benchmark area to support program accountability and future ongoing quality improvement.<ol style="list-style-type: none"><li>a) Collect data required in the format required and document encounters in the MIECHV data system within 72 hours of the contact.</li><li>b) Ensure all MIECHV staff receive training in the importance of data collection and reporting.</li><li>c) Monitor data entry on MIECHV data forms and in the MIECHV data system on at least a monthly basis to assure accuracy and quality.</li></ol></li><li>3) Submit MIECHV monthly and quarterly reports to the VDH state office and EBHV Model consultants by established deadlines.</li><li>4) Report required benchmark data on quarterly report<ul style="list-style-type: none"><li>• unduplicated number of established MOA/MOUs during the reporting period</li><li>• unduplicated number of local agencies with which the home visiting provider has a clear point of contact during the reporting period.</li></ul></li><li>5) Participate in national evaluation activities required for MIECHV funded projects. The MIHOPE project, led by the Administration for Children and Families in collaboration with the Health Resources and Services Administration, is the legislatively mandated national evaluation of the Home Visiting program. This evaluation will provide information about the effectiveness of the MIECHV program in improving outcomes for children and families.</li></ol>	
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C. Continuous Quality Improvement (CQI)	<ol style="list-style-type: none"> <li>1) Participate in MIECHV CQI activities which could include: <ol style="list-style-type: none"> <li>a) Completing a readiness assessment.</li> <li>b) Training opportunities.</li> <li>c) Other coordinated projects such as a learning collaborative, coaching, and technical assistance.</li> </ol> </li> <li>2) Document CQI activities on the MIECHV PDSA Worksheet monthly.</li> </ol>	
D. Collaboration	<ol style="list-style-type: none"> <li>1) Participate on a local or regional early childhood system coalition such as Smart Beginnings.</li> <li>2) Establish memorandum of agreement/memorandum of understanding with referral partners and other service providers.</li> <li>3) Collaborate with other early childhood home visiting programs in your community, if applicable, to assure quality services to families in need.</li> </ol>	
E. Participation in Training and Technical Assistance	<ol style="list-style-type: none"> <li>1) Assure that staff have received appropriate training in order to utilize the MIECHV required tools: <ol style="list-style-type: none"> <li>a) Maternal Depression Screening (Edinburgh or PHQ-9)</li> <li>b) Intimate Partner Violence Relationship Assessment Tool (RAT) for female caregivers and Hurt-Insult-Threaten-Scream (HITS) for male caregivers.</li> <li>c) Ages and Stages Questionnaire (ASQ-3 and ASQ-SE)</li> <li>d) Parenting Interactions with Children Checklist of Observations Linked to Outcomes (PICCOLO) or Keys to Interactive Parenting Scale (KIPS)</li> <li>e) MIECHV data collection forms</li> <li>f) MIECHV data entry</li> </ol> </li> <li>2) Assure that staff have received appropriate training through the Home Visiting Model Office to implement services in accordance with model requirements.</li> <li>3) Assure that staff participate in appropriate training through Early Impact Virginia (EIV)/Institute for the Advancement of Family Support Professionals to support the development of competencies as defined in the <u>National Competency Framework for Family Support Professionals</u></li> <li>4) Work with the Parents as Teachers Virginia State Office to request technical assistance to maintain fidelity to the evidence-based home visiting model including establishment of referral systems, staff retention, and family recruitment, enrollment and engagement.</li> </ol>	<ol style="list-style-type: none"> <li>1) Maintain staff training transcripts</li> </ol>

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F. Financial requirements	<ol style="list-style-type: none"> <li>1) Time and effort of staff (time sheets) must be documented and stored at local agency to support reimbursement for salaries and benefits.</li> <li>2) Submit Monthly Invoices for reimbursement. Mileage reimbursement may not exceed the Internal Revenue Service rate.</li> <li>3) Submit budget revision requests for any line items expenses projected to exceed 10 percent of approved budget.</li> <li>4) Funds provided to the contracting agency receiving funds from the MIECHV grant shall supplement, and not supplant, funds from other sources for early childhood home visitation program or initiatives.</li> <li>5) All revenue generated through MIECHV funded positions must be reported on quarterly reports and must be used to expand services to families or clearly deducted from monthly invoices for reimbursement.</li> <li>6) Demonstrate efforts towards establishing protocols and program capacity to contract with Managed Care Organizations to develop the process for reimbursement to sustain these services beyond the funding period and request technical assistance on sustainability, if necessary.</li> </ol>	
G. Subcontracts	<ol style="list-style-type: none"> <li>1) If any component of your MIECHV contract is performed by a sub-contractor or via an agreement such as an MOU or MOA that involves financial exchange:               <ol style="list-style-type: none"> <li>a) The MIECHV funded agency must submit the sub-contract or MOU/MOA to VDH for review prior to authorized officials signing the contract.</li> <li>b) The sub-contractor and/or MOU/MOA partner must:                   <ol style="list-style-type: none"> <li>i) Adhere to all MIECHV regulations and requirements</li> <li>ii) Account for employees' time and effort</li> <li>iii) Submit invoices</li> <li>iv) Ensure that MIECHV funding is not supplanting previously existing sources of funding.</li> </ol> </li> </ol> </li> </ol>	<ol style="list-style-type: none"> <li>1) Copy of the sub-contract or MOA</li> <li>2) (Upon request) Produce time and effort sheets, invoices and evidence that the sub-contractor was not supplanting funds.</li> </ol>

<b>BUDGET SUMMARY</b>		PROGRAM TITLE: MATERNAL, INFANT AND EARLY CHILDHOOD HOME VISITING (MIECHV) Grant Period: September 30, 2020 - September 29, 2021							
CONTRACT AGENCY:		Healthy Families - City of Hampton							
CONTACT PERSON:		Paula Hanley / Donald Rodil							
CONTRACT NUMBER:		705BJ632554-A							

  

	BUDGET CATEGORIES (OBJECT LEVEL)	ORIGINAL BUDGET		1st REVISION		2st REVISION		3st REVISION	
		REQUESTED	APPROVED	REQUESTED	APPROVED	REQUESTED	APPROVED	REQUESTED	APPROVED
1. Personnel Services (Major object 11XX)	a. Salaries	265,745							
	b. Wages	16,718							
	c. Fringe Benefits	110,920							
	d. Other	-							
2. Contractual & Operating Expenses (Major object 12XX)	a. Travel (Local mileage)	6,086							
	b. General Training	3,275							
	c. I.T. Maintenance Svc	1,308							
	d. Landline Phone Chgs	1,365							
	e. Cell Phone Chgs	800							
3. Supplies & Materials (Major object 13XX)	a. Medical & Laboratory	-							
	b. Drugs	-							
	c. Office and Admin	269							
	c. Educational	-							
	d. Other	-							
4. Continuous Charges (Major object 15XX)	a. Insurance	-							
	b. Rental Charges	-							
	c. Other	-							
5. Fixed Assets (Major object 22XX)	a. Fixed Equipment	-							
	b. Other Equipment	-							
6. In-Kind (not counted in total)	a. In-kind	84,835							
<b>TOTALS</b>	<b>TOTALS</b>	406,486	-	-	-	-	-	-	-

Awardee's Authorized Signature  
Signature & date 4/10/2020

ORIGINAL REQUEST: Paula Hanley / Donald Rodil

APPROVED/DENIED: \_\_\_\_\_

1st REVISION: \_\_\_\_\_

APPROVED/DENIED: \_\_\_\_\_

2st REVISION: \_\_\_\_\_

APPROVED/DENIED: \_\_\_\_\_

3st REVISION: \_\_\_\_\_

APPROVED/DENIED: \_\_\_\_\_

SECTION 1. PERSONNEL						
	POSITION CLASS	NAME OF INCUMBENT	ANNUAL SALARY	% OF TIME	BUDGET AMOUNT	BASIS FOR COMPUTATION OF BUDGET AMOUNT
1a. SALARIES	Fam.Svcs Spec.Sup	Hanley, Paula	54,227	100%	\$ 54,227	Supervisor salary based on
					\$ -	roles & resp. of position &
					\$ -	City of Hampton salary
					\$ -	structure
					\$ -	
	Fam.Svcs Specialist	Hare, Colby	40,721	100%	\$ 40,721	Based on roles and
	Fam.Svcs Specialist	Haynesworth, Sarah	40,721	100%	\$ 40,721	responsibilities of position
	Fam.Svcs Specialist	Huff, Rebekah	42,782	100%	\$ 42,782	& City of Hampton salary
	Fam.Svcs Specialist	LaRoche, Casey	44,511	100%	\$ 44,511	structure
	Fam.Svcs Specialist	Nianda, Ebony	42,782	100%	\$ 42,782	
JUSTIFICATION:	Staff required to run the program. This also includes the 3% increase rec'd citywide beginning 7/1/20					
Total of Salaries only	\$ 265,745					
	POSITION CLASS	NAME OF INCUMBENT	HRS/WK	\$/HR	BUDGET AMOUNT	BASIS FOR COMPUTATION OF BUDGET AMOUNT
1b. WAGES	Part-Time Data Clerk	OPEN	25	12.86	\$ 16,718.00	\$12.86/hr X 25hrs/wk X 52 wks
					\$ -	
PAGE TOTAL	\$ 282,463					
JUSTIFICATION:	Part-time Data Clerk as requested to collect and enter all client related data in the REDCap system.					



## SECTION 1 (CONTINUED): FRINGE BENEFITS

	BASIS FOR COMPUTATION OF FRINGE BENEFITS	BUDGET TOTAL
1) EMPLOYEE'S RETIREMENT CONTRIBUTION	15.91% of \$265,745	42,280
2) FICA	7.65% of \$282,463 (includes PT Data Clerk Wages)	21,608
3) GROUP INSURANCE	1.32% of \$265,745	3,508
4) MEDICAL/HOSPITAL INSURANCE	15.72% of \$222,963 (\$265,745 - \$42,782 R. Huff has insurance plan outside the City's plan)	35,050
5) WORKER'S COMPENSATION	3.00% of \$282,463	8,474
6) OTHER		
<b>TOTAL</b>		<b>\$ 110,920</b>

## JUSTIFICATION:

Rates provided by Finance and Risk Management Departments - Shari Declet, Candy Broughman, & Patricia Parker

SECTION 2: CONTRACTUAL AND OPERATING EXPENSES					
2a. CONTRACT SERVICES; LIST CONTRACTORS:					BUDGET AMOUNT
DESCRIBE SERVICE AND SUMMARIZE COSTS					
3) TRANSPORTATION COSTS / PROJECT OWNED VEHICLES ONLY; DESCRIBE:					BUDGET AMOUNT
	FUEL COSTS	MAINTENANCE COSTS	INSURANCE COSTS	NAME	
				Paula Hanley	
				July Duty, Rebekah Duvall, Ebony Kelley	
2c. UTILITIES				Casely, BRONIE & Crystal Parker	
LIST PROJECT SITES below	ELECTRICITY	GAS/OIL	WATER/SEWAGE	ROUTINE NEW INSTAL	BUDGET AMOUNT
				Landline \$18.95/mo x 12mos x 6 staff	\$ 1,365.00
				Cell Phn \$66.14/mo x 12	\$ 800.00
2d. OTHER SERVICES / LIST:					BUDGET AMOUNT
I.T. PC Maintenance Fees	\$218/yr x 6 PCs				\$ 1,308.00
PAGE TOTAL					\$ 12,834.00
JUSTIFICATION:					
Required operational costs to run the program					
* PAT Curric. Annual Access and Renewal: (Affil. Fee - \$2,000, Foundational1 & 2 Curriculum renewal: \$255.00 * 5 Stf mem. = \$1,275,					





<b>SECTION 4. CONTINUOUS CHARGES</b>	<b>UNIT</b>	<b>NAME OF UNIT</b>	<b>COST PER UNIT</b>	<b>BUDGET AMOUNT</b>
4a. INSURANCE				
4b. RENTAL CHARGES				
4c. OTHER				
<b>SECTION 5. FIXED ASSETS</b>	<b>PURCHASE PRICE</b>	<b>INSTALLATION COSTS</b>		<b>BUDGET AMOUNT</b>
5a. FIXED EQUIPMENT				\$ -
5b. OTHER EQUIPMENT				
<b>TOTAL</b>				<b>\$ -</b>
JUSTIFICATION				

<b>SECTION 6. IN-KIND SUPPORT</b>	
DESCRIBE SOURCES OF IN-KIND SUPPORT	BUDGET AMOUNT
Leadership, Administrative, Data Base Management, &	
Building Space Support (see next tab for details)	\$ 84,834.72
<b>TOTAL</b>	<b>\$ 84,834.72</b>

NOTE: THIS TOTAL IS NOT INCLUDED IN THE OVERALL  
BUDGET AMOUNT

**Maternal, Infant and Early Childhood Home Visiting Project**

In-Kind Contribution

Project Period 9/30/2020 - 9/29/2021

Includes proposed increase of 3% pending Council Approval (this is as of 4/10/2020)

Line Item	Total Annual Cost (Salary + benefits of 43.76%)	Total # of Employees this Position/Resource Supports	Cost per Employee (Full-time)	# of MIECHV Grant Employees	In-Kind Contribution by Line Item
<b>Departmental Support</b>					
Department Administrator	99,264	57	1,741.47	6	10,448.84
Business Operations Mgr	126,642	57	2,221.79	6	13,330.71
Administrative Assistant	57,215	57	1,003.78	6	6,022.66
<b>Direct Services Support</b>					
Family Services Prgm Mgr	126,874	47	2,699.45	6	16,196.68
Support Services Coordinator	52,587	47	1,118.88	6	6,713.26
Office Assistant	31,941	47	679.59	6	4,077.54
Data Base Administrator	59,679	47	1,269.77	6	7,618.65
Office Specialist (Data)	44,565	47	948.18	6	5,689.11
Building Lease (Utilities included)	140,004	57	2,456.21	6	14,737.26
<b>Total In-Kind Support</b>					<b>\$ 84,834.72</b>