

Coordinated Intake Program Standards – During the QA Site Visit, agency records related to these standards (which are currently in agency contracts or will be included in FY 19 agency contracts) will be reviewed. If these deliverables have not been met, please identify what the barriers are, what supports are needed, and what program strategies will be implemented to overcome them.

Program Standards and Deliverables					
1. Home Visiting (HV) Agency Caseload Capacity	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes
a. Maintain 85%* of the MIECHV agency HV caseload capacity. ** All HV programs in CI’s network that have been active for a year or longer will maintain at least 85% of their maximum service capacity. Maximum service capacity is the highest number of households that could potentially be enrolled at the end of the quarterly reporting period if the program were operating with a full complement of hired and trained home visitors.	MIECHV monthly Visit Tracker (VT) report cards; quarterly report	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
b. Work with collaborative partners to maintain 85% non-MIECHV HV caseload capacity	Tracking spreadsheet for non-MIECHV HV referrals	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
Comments:					
*If a minimum of 85% is not maintained for 3 consecutive months, the HV program may be put on a corrective action plan. **HRSA requires 85% at the state level. If not at 85% or higher, the state is put on a corrective action plan.					
2. Coordinated Intake System	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes
a. 100% of MIECHV home visiting referrals should be logged and tracked by the CI worker within 2 business days, regardless of origin of the referral.	Policy and procedure manual;	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	

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<i>(Is there a clear policy and procedure for HV programs within the community to recruit and refer to CI, and are they following it?)</i>	Dates on CIAT forms; Baseline capacity on VT report cards; VT documentation				
b. What % of non-MIECHV home visiting referrals are being processed by CI?	Tracking spreadsheet; Baseline capacity	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A	
c. Are non-MIECHV referrals processed within 2 business days?	Dates on CIAT				
d. Community has a clear process for sharing and documenting referrals so CI is always informed.	MOUs; Written procedures; Flow chart	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
e. Proactive steps are taken to encourage agency compliance with the coordinated intake policy and procedure, such as bi-weekly email reminders	Emails, fax or other communication logs, etc.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
Comments:					
3. CIAT completion and referrals	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes
a. CIAT Form is complete with date and signature for consent, and reason for referral/risk factors included.	VT Documentation; Original CIAT forms	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
b. 100% of positive screens (of priority populations) are referred to most appropriate program model within 2 business days, and receipt by provider is documented.	VT Documentation; Original CIAT forms; Emails; VT Form 1	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
c. CIAT addresses eligibility requirements of MIECHV and local HV agencies.	CIAT form	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	

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d. If all home visitors are at capacity, CI will refer to appropriate community resources and place participants on a waiting list for home visiting services.	Spreadsheet documenting referrals	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
e. Waiting list participants will receive a minimum of monthly contact to monitor availability of services and eligibility of participant. How are waiting lists maintained by the CI? (If there is no current waiting list, what is the plan for maintaining one?)	Policy and procedure for wait list management	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
f. A procedure is in place for completing and following up on emergency referrals.	Policy and Procedure Manual	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
g. Follow-up is completed with HV programs to determine the outcome of HV referrals, and track how many families enrolled in HV.	Phone logs; Emails; Tracking spreadsheet	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
h. 100% of negative screens are referred to other community and parenting services as indicated. (Is this indicated on the CIAT or elsewhere in the client's file?)	CIAT; Referral tracking spreadsheet; Referral list; resource directory, etc.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
i. Is there a current list of programs to refer to? How is this list/directory maintained?	Program list/directory	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
Comments:					
4. Data Collection and Documentation	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes

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a. CIATS are entered in Visit Tracker database within 48 business hours, and referrals are sent to HV sites (MIECHV and non-MIECHV) within 48 business hours.	Visit Tracker; Emails	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
b. Agency has a back-up plan in place for when CI is absent, and that a back-up system is used to complete CIATS and send referrals out in a timely way.	Policy and Procedure Manual	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
c. All HV Referrals (MIECHV and non-MIECHV) are tracked on monthly Excel tracking spreadsheet provided, and are submitted monthly (non-VT, faxed, scanned, and emailed CIATS should be included in this count) to Governor’s Office.	Tracking spreadsheets; Policy and Procedure Manual; Emails	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
d. A clear policy and procedure is in place for the sending and tracking of HV referrals, including enrollment into HV programs.	Policy and Procedure Manual	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
e. The written procedures are being followed.	Monthly tracking spreadsheets	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
f. The outcome of HV referrals is entered and tracked for enrollment into HV services.	Visit Tracker; Referral tracking spreadsheet	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
g. Community referrals to non-HV services completed by CI, including emergency referrals, are tracked on Excel tracking spreadsheet.	Referral tracking spreadsheet	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
Comments:					
5. Community Outreach and Collaboration	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes
a. CI convenes a minimum of 6 meetings per year with collaborative partners. (If there is a pre-existing Early	Meeting attendance sheets;	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	

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Childhood collaborative, such as an AOK network, this network should be supported by MIECHV staff.) (Note: is Early Intervention included in collaborative efforts? Is CI connected with LIC?)	Quarterly reports; Meeting minutes; MOUs				
b. At least 2 public awareness/community awareness events were attended by CI to market HV programs/promote home visiting.	Quarterly reports; Flyers or other documentation of events	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
c. IGROW brand is included on marketing materials used for outreach/recruitment efforts	Flyers/posters; Brochures	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
d. A variety of strategies are used to recruit families to HV	Use of social media; Outreach logs; Quarterly reports; Marketing materials	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	

Comments:

6. Supervision (CI)	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes
a. CI Supervisor provides at least one hour of reflective supervision, at least twice per month to CI worker. (Supervision hours may be pro-rated for CIs who work less than 1.0 FTE.) <i>Are infant Mental Health Consultants included in your reflective work?</i>	Supervision logs and notes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
b. Documentation of supervision is clear, specific, and reflective. Supervision notes are signed by worker and supervisor.	Supervision notes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
c. Supervision record contains documentation of supervision regarding ongoing service provision and progress toward Program Plan goals/objectives.	Program Plan; Supervision notes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	

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d. Supervision record contains action steps and progress to address any challenges or barriers that were discussed.	Supervision notes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
e. The supervision is provided by someone who has a demonstrated knowledge of home visiting as well as the role of the CI worker.	Supervisor resume; Training log	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
Comments:					
7. Staff Hiring and Training	Documentation	Present	Compliant	Corrective Actions Required	Reviewer Notes
a. All new CI staff hired should complete HV model overview training within 90 days of hire.	Policy and Procedure re turnover; Training log	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
b. Staff vacancies are filled in a timely manner so that CI activities are not disrupted.	Staff hire and exit dates	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
c. An interim plan is in place for turnover, so referral flow continues.	Policy and Procedure; Monthly tracking spreadsheet	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
d. Staff training logs are up to date and reflect completion of mandatory trainings within designated timeframes Are there unmet staff training needs? If so, on what topics?	Staff training log	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	
e. CI staff attends and participates in a minimum of 75% of quarterly Learning Community Meetings.	Attendance sheet/ meeting minutes	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Completed	

Comments:

Recommendations: