# General Principles for DEL HVSA Contracts Monitoring

The list below (and presented in Attachment 3 of your contract) describes framework of service delivery, program achievements and milestones upon which your contract will be monitored by DEL. Our goal is to use a strengths based approach to monitoring that

* acknowledges the incredible effort to maintain fidelity to the program models while serving high risk families throughout the state, and
* continues to aim high in accomplishing high quality service delivery, maintaining enrollment targets and serving families with adequate dosage to make a sustained difference in the lives of participating children and their parents.

Over the year, based on submitted reports and communication with you, your DEL program specialist will review your program performance in the following areas. If areas of concern arise, you may expect direct communication and support from DEL and Thrive to address these areas. If performance concerns continue, a more formal process of Implementation Improvement Planning will ensue.

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| **Monitoring Topic** | **General Review** |
| 1. **Model Fidelity  Letter and Indicators** | * By 12/31/17 National Service Office for Program Models have issued a letter indicating the program is operating with fidelity to home visiting program model. * Programs not having a national service office have worked with Thrive to develop indicators of fidelity and are demonstrating fidelity to those indicators. * For programs where the national service office or Thrive indicate there are concerns with model fidelity, the program is progressing in addressing and correcting those areas of fidelity concerns. |
| 1. **Staffing, Supervision, and Training** | * The program is maintaining sufficient staffing and training for staff to deliver expected number of home visits to the expected caseload of participants. * Programs with staff changes have developed plans for filling vacancies quickly and with qualified personnel. * All programs have policies in place to retain personnel. * Home visitors working at .5 FTE or greater receive at least 2 hours of individual **reflective** supervision and 1 hour of group supervision each month. |
| 1. **Service Area and Recruitment of Priority Populations** | * Program is enrolling HVSA priority populations and meeting contractual requirements for geographic and other specific characteristics when applicable. |
| 1. **Participant Enrollment, Retention and Caseload Maintenance** | * Enrollment–program has an active enrollment of at least 85% of maximum service capacity (based on DOH data report). |
| 1. **Visit Frequency and Content** | * Dosage –program is meeting model dosage requirements with at least 70% of participants (based on DOH data report). * Screenings occur with model fidelity, and program describes successes and challenges with referrals. |
| 1. **Systems Connections** | * Program reports on connections with their regional early learning coalition and other important local early childhood systems partners. * For TANF programs, they are building and maintaining strong relationships with local DSHS CSOs and utilizing eJas. |
| 1. **Data Collection and Evaluation Requirements** | * Program has executed the DSA with DOH and is on track with data entry and downloads. * Program reviews data and I progressing on performance measures. |
| 1. **Continuous Quality Improvement Activities** | * Program is on track with CQI requirements (Plan, Charter, and Project Reports) and is learning from their PDSA cycles and applying learning. |
| 1. **Quality Improvement Technical Assistance** | * Program submitted a Self-Reflect to Thrive. * Program is an active collaborator with Thrive in planning for and receiving TA, demonstrating progress in organizational and program capacity to deliver high quality services. |
| 1. **Financial/expenditure documentation** | * Program has submitted adequate documentation supporting invoices, with expenditures in line with budget. |