



**Office of Children
and Family Services**

HFNY Accreditation 101

What to expect over the next few months!



**Office of Children
and Family Services**



Prevent Child Abuse
New York™



CENTER FOR HUMAN SERVICES RESEARCH
UNIVERSITY AT ALBANY State University of New York

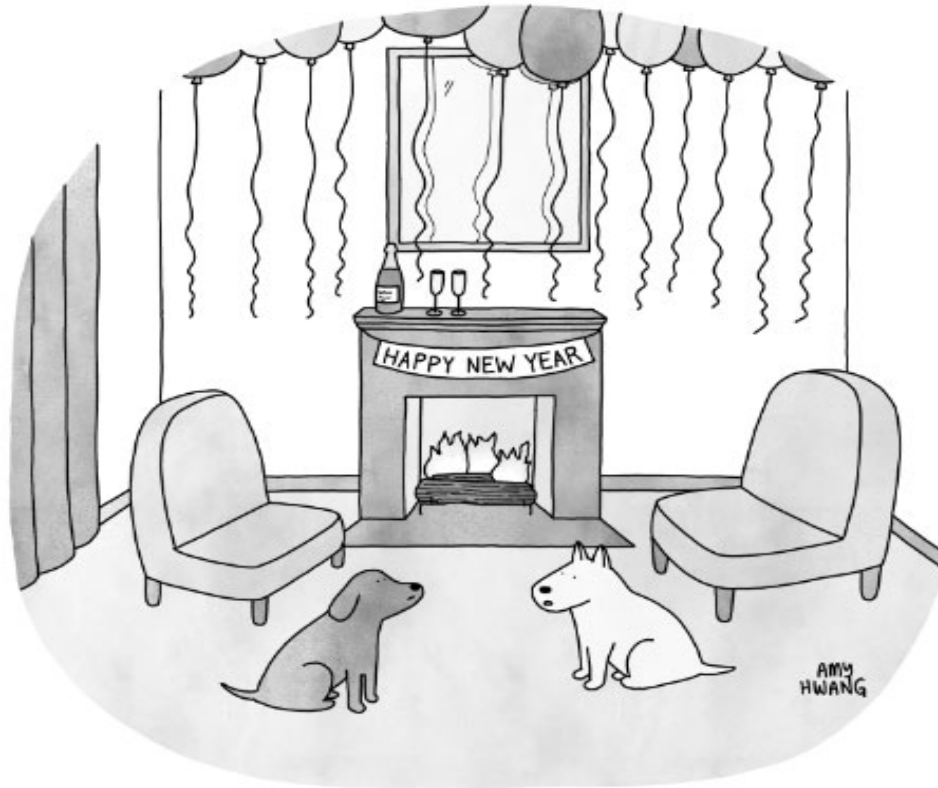
February 22, 2023



Office of Children and Family Services

Thank you to Massachusetts Healthy Families for providing guidance and sharing their materials on the HFA Accreditation Process.





"Has it been another ~~seven~~ years already?"

↑
5 years

Today's agenda

Questions you may be asking yourself...

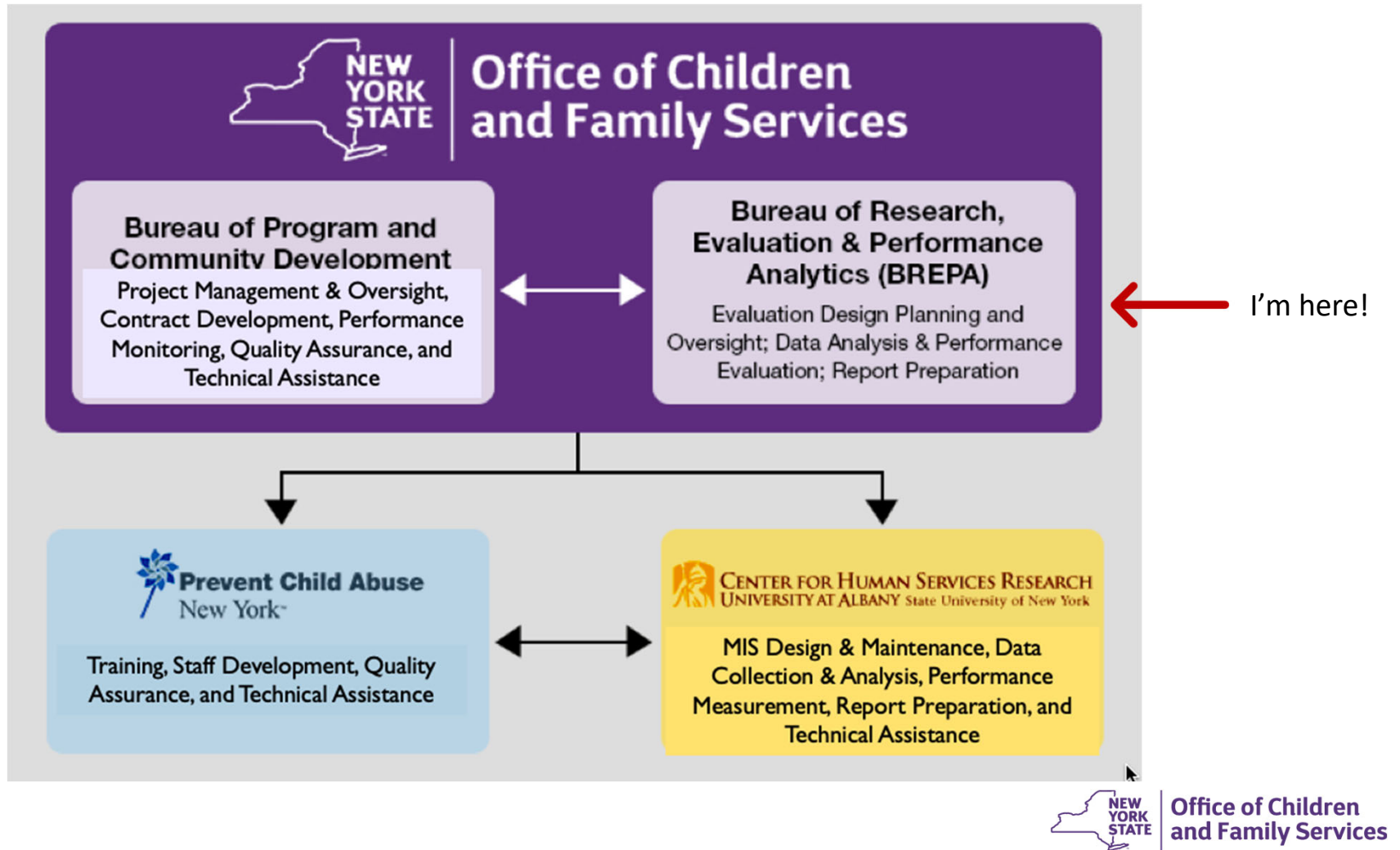
- What is CA and who are you?
- What shared expertise exists within HFNY?
- What are the Best Practice Standards and why do I need to memorize them? (just kidding...sort of)
- What is the accreditation process?
- How will I be rated and based on what?
- What can I expect from HFNY CA?
- What is expected of me?
- What do I need to start doing?

What is a Multi-Site System?

HFA State/Multi-Site Systems consist of a central administrative entity providing support to a group of HFA Single Sites. The functions of the central administration (CA) involve the delivery of policy, training, quality assurance, technical assistance, evaluation, and administrative guidance to the system.

A primary advantage for multi-site systems is that there is an “economy of the whole” that can assist sites in meeting the best practice standards. In affiliated State/Multi-Site Systems, the CA becomes the primary contact with the HFA National Office.

In our state, the Multi-Site System is Healthy Families New York (HFNY) and is referred to as Central Administration or CA.



What shared expertise exists within HFNY?

***Supporting Families
Right From the Start***



Office of Children
and Family Services

HFNY Accreditation History

- 2004** – **1st state** to receive HFA multi-site accreditation
- 2008** – Receives 5-year multi-site accreditation
- 2013** – Receives 5-year multi-site accreditation
- 2019** – Receives 5-year multi-site accreditation
- 2024** – **We WILL receive 5-year multi-site accreditation!!!**



Poll: Experiences with Accreditation



Poll Questions

- Have you ever experienced a HFA Accreditation visit?
- Has your site gone through a HFA Site Visit?
- What was the hardest part about the self study?
 - The writing process
 - The analysis process
 - Knowing what to include
 - Finding the information to include in the self study
 - Knowing how to organize all of the materials
- Have you gone through HFA peer reviewer training?
- Have you served as a peer reviewer?
- Have you completed HFA Implementation Training?



Poll Results

- Have you ever experienced a HFA Accreditation visit? 41% said YES
- Has your site gone through a HFA Site Visit? 69% said YES
- What was the hardest part about the self study? No skip option available (error)
 - The writing process - 29%
 - The analysis process – 31%
 - Knowing what to include – 29%
 - Finding the information to include in the self study – 19%
 - Knowing how to organize all of the materials – 32%
- Have you gone through HFA peer reviewer training? 27% said YES
- Have you served as a peer reviewer? 4% said YES
- Have you completed HFA Implementation Training? 47% said YES

What are the Best Practice Standards?

Supporting Families Right From the Start

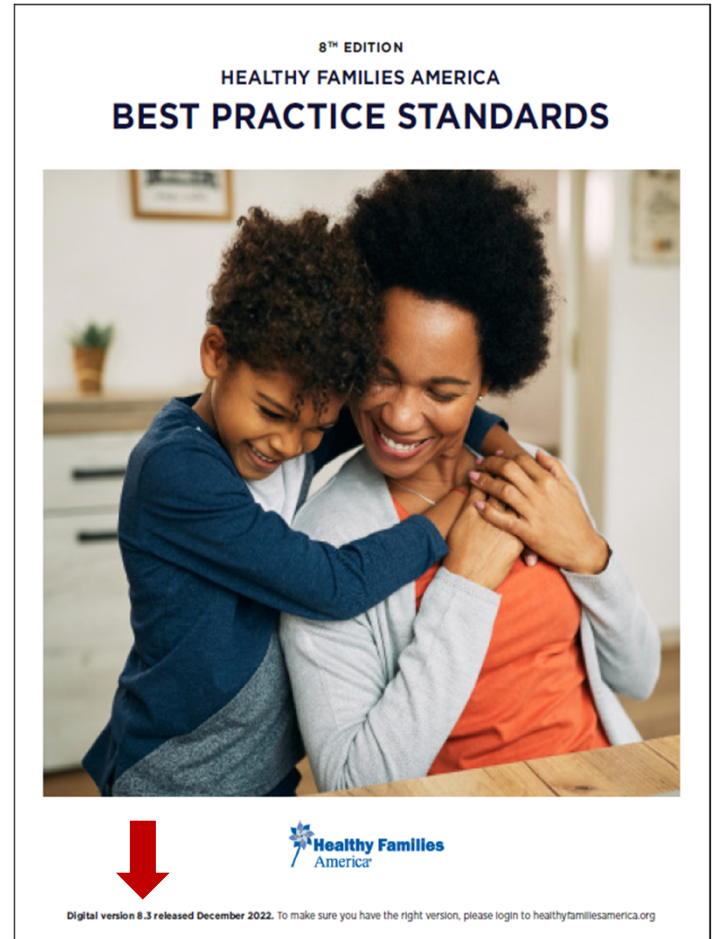


Office of Children
and Family Services

Healthy Families America Best Practice Standards 8.3

Critical Elements

- BPS 1: Initiate Services Early
- BPS 2: Standardized Assessment Tool (FROG)
- BPS 3: Offer Services Voluntarily
- BPS 4: Offer Services Intensely
- BPS 5: Diversity, Equity, Inclusion
- BPS 6: Promote PCI, Childhood Growth, and Development
- BPS 7: Health Care and Community Resources
- BPS 8: Limited Caseload Sizes
- BPS 9: Service Providers Selection
- BPS 10: Model Specific Training
- BPS 11: Training to Fulfill Job Functions
- BPS 12: Ongoing Reflective Supervision
- GA: Governance and Administration
- National Office Requirements



BPS Structure

First Order Standard

- Critical element
- The overall purpose or aim of the practice

Second Order Standard

- Major components of model fidelity
- Provide further context to guide implementation
- Some are stand-alone and have no 3rd order

Third Order Standard

- System and practice building blocks
- Allow for formation of strong programmatic practice




1st Order

Standard 1 Intent is to ensure the site has a well-thought out mechanism for the early identification and engagement of families who could benefit from services. The earlier families are enrolled during pregnancy the greater the opportunity to support healthy practices during pregnancy which can lead to improved birth outcomes (Lee, E., et al, 2009) and longer term parent and infant health.

2nd Order

1-1. The site has a description of its eligibility criteria and the community relationships in place to identify and initiate services during pregnancy or within three months of birth. *Please Note: See glossary for limited exception and approval process related to HFA's Child Welfare Protocols.*

1-1.A The site has a description of: 1) its eligibility criteria 2) how these criteria were selected, 3) the defined service area, and 4) the number of families the site has capacity to serve. Eligibility criteria are determined based on data collected from one or more sources, e.g., a community needs assessment, kidscount.org, state rankings, vital records, census.gov, etc., and are reviewed by the site's community advisory board at least once every four years.


3rd Order



Safety Standards

These standards **must be met** in order to be accredited as they impact the safety of the children and families being served and the staff serving them.

9-3.B Legally Permissible Background Checks Safety Standard

10-2.D Staff Oriented to CA/N indicators and Reporting Requirements

12-1.B Supervision Frequency and Duration

GA-3.C Informed Consent to Release Information

GA-4.A Child Abuse and Neglect Reporting

GA-4.B Reports Suspected CA/N to Proper Authorities



Essential Standards

These standards embody the essence of what it means to implement HFA. Not required to receive accreditation BUT if out of adherence an improvement plan will have to be submitted.

2-1.B Administration of the FROG scale to learn about family strengths and challenges

3-3.B Use of Creative Outreach as a trauma-informed strategy to build trust

4-2.C Use of HFA Level Change forms to review family progress

5-4.B Development of an Equity Plan

6-1.C Implementation of the Service Plan

6-2.B Supports that FSSs provide around setting and achieving family goals

6-3.B, C & E Use CHEERS to observe, partner with, and support families w/ sup support

9-1.D Processes of hiring HFNY direct staff

10-4.A, B & C Core trainings required of staff within certain timeframes

12-2.B Provision of weekly reflective supervision to all direct service staff

GA-3.A Policies and forms related to family rights & confidentiality

GA-3.B Practice of informing families of their rights and process of confidentiality



National Office Standards

HFA National Office will confirm that GA-7 standards are in adherence in order to receive an award of accreditation.

GA-7.A Site ensures all HFA required data is provided as specified in requirements

GA-7.B Site is up-to-date with all fees owed to HFA National Office

GA-7.C Site utilizes the trademarked HFA name, logo, and brand according to HFA standards

GA-7.D Site ensures that the National Office is notified of a site's participation in a research study involving the HFA model of participating families enrolled in services as per HFA Site Research Policy



Intents and Tips

Intents The “Whys”

- *1st Order*
 - Sets foundation/context for the element
- *2nd & 3rd Order*
 - Provide further clarification about the purpose of the standard

Tips The “Hows”

- Included to aid in implementation of standards
- Provide good ideas on documentation and implementation of the standard
- NOT required



1st Order Intent Why



Standard 1 Intent is to ensure the site has a well-thought out mechanism for the early identification and engagement of families who could benefit from services. The earlier families are enrolled during pregnancy the greater the opportunity to support healthy practices during pregnancy which can lead to improved birth outcomes (Lee, E., et al, 2009) and longer term parent and infant health.

When enrolled in the newborn period (0-3 months), parents can be supported with consistent, responsive, nurturing caregiving practices early in the infant's development, helping to ensure a secure attachment relationship. This timing is pivotal and research demonstrates it can increase resilience and buffer the child from later adversity (Hambrick, Brawn & Perry, 2017). Children who are securely attached as infants tend to develop stronger self-esteem and better self-reliance as they grow older and also tend to be more independent, perform better in school, have successful social relationships, and experience less depression and anxiety (Young, Simpson, Griskevicius, Huelsnitz, & Fleck, 2019).

1.4. The site has a description of its eligibility criteria and the community relationships in place to identify and initiate services during pregnancy or within three months of birth. *Please Note:* See glossary for limited exception and approval process related to HFA's Child Welfare Protocols.



1-1.A The site has a description of: 1) its eligibility criteria 2) how these criteria were selected, 3) the defined service area, and 4) the number of families the site has capacity to serve. Eligibility criteria are determined based on data collected from one or more sources, e.g., a community needs assessment, kidscount.org, state rankings, vital records, census.gov, etc., and are reviewed by the site's community advisory board at least once every four years.

Intent: Communities choose to implement the HFA model as a mechanism to improve family and child outcomes and do so because there is local, state, and/or federal interest in providing supportive home visiting services in partnership with parents of infants and young children. It is important for the site to focus on creating equitable access to services for families experiencing barriers to resources and to base its eligibility criteria on community data, ensuring a systematic process for identifying families is in place.

The site's eligibility criteria are reviewed at least once every four years and updated as changes in funding, site infrastructure, or community demographics warrant. When the site is approved to implement HFA's Child Welfare protocols for families referred from child welfare, this must be referenced in the site's eligibility criteria description.



3rd Order Intent
More why



Office of Children
and Family Services

Tip How

*i*

For example, I work with my community advisory board and we determine teen parents are the eligibility criteria we will use, because teen parents are an underserved demographic in our area and there are very few existing services in our community to support them. We know from the Kids Count Data Center (kidscount.org), in the most recent year data is available, a total of 1,000 women under the age of 20 gave birth in our area. We also know 780 women under the age of 20 gave birth in our city's largest birthing hospital last year. We therefore define our eligibility criteria as pregnant or parenting teens (with an infant less than 3 months old), who reside in Babyville County. We have ten full-time Family Support Specialists able to serve a total of 200 families each year.



What is the accreditation process?

***Supporting Families
Right From the Start***



Office of Children
and Family Services

So, what is Accreditation?

- National hallmark for guiding quality service delivery & ensuring model fidelity
- Quinquennial process that synthesizes QA/QI HFNY practices (ASR, site visit, quarterlies, PIs/PTs, policy development)
- Opportunity to enhance connections to central administration and peer networks

HFA Accreditation Process



How will I be rated and based on what?

***Supporting Families
Right From the Start***



Office of Children
and Family Services

Rating Indicators

3 = Program exceeds the standard

2 = Program meets the standard




1 = Program does not yet meet the standard

N/A = Not Applicable



3rd Order Standard with 3 rating options




1-1.A RATING INDICATORS

-  **3** The site has a description of 1) its eligibility criteria 2) community data (include source and year) used in deciding on these criteria, 3) the geographic service area, and 4) the total number of families projected annually to be served based on site capacity. The description and data utilized have been reviewed by the site's community advisory board **within the last two years**, and adjusted as needed based on changing community demographics or program infrastructure.
-  **2** The site has a description of 1) its eligibility criteria 2) community data (include source and year) used in deciding on these criteria, 3) the geographic service area, and 4) the total number of families projected annually to be served based on site capacity. Both the description and data utilized have been reviewed by the site's community advisory board **within the last four years** and adjusted as needed based on changing community demographics or program infrastructure.
-  **1** The site does not yet have a description of its eligibility criteria; or any of the following are not yet included: community data (source and year), service area, or total number of families projected annually to be served; or it has been four years or more since the community advisory board last reviewed.



3rd Order Standard with 2 rating options

1-1.B RATING INDICATORS

-  **3** No 3 rating indicator for 1-1.B.
-  **2** The site identifies organizations within the community where families can be referred from, and agreements (either formal or informal) are in place. Sites approved by the National Office to implement HFA's Child Welfare Protocols have an MOU established with the local child welfare office.
-  **1** The site does not yet identify organizations within the community where families can be referred from, or the site has not yet initiated relationships with identified referral organizations; or if approved to use HFA's Child Welfare Protocols, does not have an MOU established with the local child welfare office.



Self-study evidence

- Policy
- Analysis
- Plans (e.g., Equity and CQI)
- Narratives
- MIS reports (e.g., data)
- Other Documents (e.g., job descriptions, job postings, staff resumes)

Tables of Documentation

*Note: Submit [Self Study Face Sheet](#) with Self Study

1. Initiate services early, ideally during pregnancy.

Standard	Pre-Site Documentation to include in Self Study
1-1.A Eligibility Criteria	Submit a narrative description of: 1) Site eligibility criteria 2) how these criteria were selected, 3) the defined service area, and 4) the number of families the site has capacity to serve. Eligibility criteria are determined based on data collected from one or more sources and reviewed at least once every four years.
1-1.B Referring Organizations	Submit a narrative identifying organizations within the community where families can be referred from, and the formal/informal agreements in place. Sites approved by the national office to implement HFA's Child Welfare Protocols have an MOU established with the local child welfare office. Sample MOU available.
1-1.C Tracking Referrals and Site Capacity	Submit report reflecting all families referred in the most recent quarter: <ol style="list-style-type: none"> 1. Number of families referred by each referral source 2. Their eligibility status 3. Include most recent plan with strategies to fill available slots or reduce gaps in service availability and indicate which have been applied <p>Please note: An HFA Spreadsheet is available for data elements of this standard</p>



Tables of Documentation

Summary and Guidance for Data Collection Timeframes

The Tables of Documentation provide a complete list of data requirements in the HFA Best Practice Standards (BPS). Also included is a column with recommended timeframes for ongoing monitoring and adherence to the standards, as it is helpful to have routine monitoring, measurement, and documentation of these activities support your site's Quality Assurance Plan (GA-2.A). These recommended timeframes may also be helpful as you develop and follow-up on your site's Quality Improvement Plan (Standard GA-2.B). When a site finds that any of these QA activities are following below expectations stated in the standards the site is also encouraged to include these items on their site Quality Improvement Plan for ongoing monitoring and improvement.

Measuring/Monitoring/Reporting Timeframes

- Annual - Site selects the most recent 12 months, most recent calendar year, or most recent fiscal year
- Quarterly - Site selects the most recent three months, or most recent full quarter (Jan-Mar, Apr-Jun, Jul-Sept, Oct-Dec)

Standard	Required Timeframe	How to Measure Please Note: HFA Spreadsheets are available	What to report for Accreditation (see also Tables of Documentation by Standard)	Ongoing QA Recommendations
1-1.C Tracking Referrals and Site Capacity	Quarterly	Submit report reflecting all families referred to your site in the most recent quarter: 1. Number of families referred by each referral source 2. Their eligibility status Include most recent plan with strategies to fill available slots or reduce gaps in service availability. Indicate which have been applied.	HFA Spreadsheet or local data report and strategies.	Update Monthly
1-2.B Initial Engagement Process	Annual	Submit a narrative about how the site monitors its initial engagement process and activities reflecting all families referred in the most recent year. A data report may be submitted in combination with a narrative regarding engagement activities. HFA's spreadsheet includes: 1. The length of time from referral to initial contact 2. The length of time from initial contact to offer of services 3. Whether able to establish initial contact or not. 4. Whether services were offered or not. Reasons why if services not offered.	HFA Spreadsheet or local data report and strategies.	Update Quarterly or more frequently, depending on number of referrals received



What can I expect from
HFNY CA?

***Supporting Families
Right From the Start***



What we will provide

- Monthly Accreditation 101 workshops
- Monthly Accreditation office hours
- HFNY Accreditation Guidance Tool
- Narrative boilerplate language for some standards
- Analysis assistance
- Written feedback on self-study

HFNY Accreditation Timeline

2023												2024	
Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb
Look out for CA's Accreditation Standards of the Month emails, Office Hours!	Review current HFNY finalized Policies; Make plan to update site procedures as needed	Review narrative items; Update as needed 1, 2, 3 Office Hours	<i>PIs</i> Review addtl. finalized policies, site procedures, adherence: 6, 10, 11 Office Hours	Review analysis items; Make plan to improve performance as needed <i>Analysis Item Office Hours</i>	Review finalized policies, site procedures, adherence, analyses: 4, 5, 9 Office Hours	Review finalized policies, site procedures, adherence: 12, GA Office Hours	Review finalized policies, site procedures, adherence: 7, 8 Office Hours	Submit Self-Study items to OCFS by 9/15/23 <i>Any Item Office Hours</i>	<i>PIs</i> Incorporate CA feedback to Self-Study <i>Open Office Hours</i>	<i>Open Office Hours</i>	Final Data Entry	Final Self-Study due to CA on 1/5/24	CA's Site Visit! Programs to be visited (Spring/Summer) selected by HFA
Accreditation 101 Sessions	2/22	3/15	4/5	5/3	6/7	7/19	8/16	9/6	TBD	TBD			
	<i>10am-Noon</i>												

What to expect....

Accreditation 101 Workshops

- Every month we will focus on a set of standards
- We will walk through the HFNY Accreditation Guidance tool in detail
- We will review some examples
- All workshops will be recorded so we can revisit the content when needed

What to expect...

Accreditation Office Hours

- An opportunity to connect with a new PCM and other Program Managers
- A smaller group where program-specific strategies, questions and concerns can be shared
- An opportunity to provide valuable feedback based on your lived experience
- An opportunity to share your drafts of self-study materials and receive feedback from peers
- TA from BREPA and CHSR around program-specific analysis and report interpretation

What to expect...

Accreditation Office Hours

In short, an opportunity for tailored support!



Accreditation Buddy Cohorts & PCMs

Albany

- Roseanna Counterman & Tom Dwyer

Mid-Hudson

- Ann Marie Johnson

NYC

- Karen Harkness, Karli Chiavelli & Lorraine Cummings

Syracuse

- Jennifer Denny

Western

- Adrianna Hodgson & Matt Newman



Adrianna

- Chemung, Monroe, Ontario/Yates, Steuben/Livingston, Wayne

Ann Marie

- Dutchess, Orange, Rockland, Westchester

Jennifer

- Cortland, Jefferson, Madison, Niagara/Orleans

Karli

- Central Harlem, DWDC, Staten Island, Suffolk

Karen

- Brookdale, Bushwick, CAMBA, Sunset Park

Lorraine

- Corona, Jamaica, Morris Heights, Parkchester, South Bronx

Matt

- Alley/Cat, Broome, Buffalo, Chenango, Oswego

Roseanna

- Albany, Clinton/Franklin, Delaware, Otsego, Schenectady

Tom

- Herkimer, Oneida, Rensselaer, Sullivan, Ulster



What to expect...

HFNY Accreditation Guidance Tool

	A	B	C	D	E	F	G	H	I	J	K
3	1	1st Order						INITIATE SERVICES EARLY			
4	1-1	2nd Order						Description of eligibility criteria and community relationships 1) Description of eligibility criteria 2) Community data (include source and year) used in deciding these criteria 3) Geographic service area 4) Number of families projected annually based on site capacity 5) Reviewed by the site's community advisory board (CAB) in last 4 years (2 rating) 6) Reviewed by the site's community advisory board (CAB) in last 2 years (3 rating) 7) Adjusted as needed based on changing demographics or infrastructure	Submit a narrative description of: 1) Site eligibility criteria 2) how these criteria were selected, 3) the defined service area, and 4) the number of families the site has capacity to serve. Eligibility criteria are determined based on data collected from one or more sources and reviewed at least once every four years.		
5	1-1.A	3rd Order		Self-Study	Narrative						
5	1-1.B	3rd Order		Self-Study; File Review	Narrative			1) Identifies referral partners 2) Formal/Informal agreements 3) If CWP - signed MOU with local DSS identified/referred and includes: 2) Eligibility status 3) Source of referral.	in partnership with an external entity		

What to expect...

HFNY Accreditation Guidance Tool

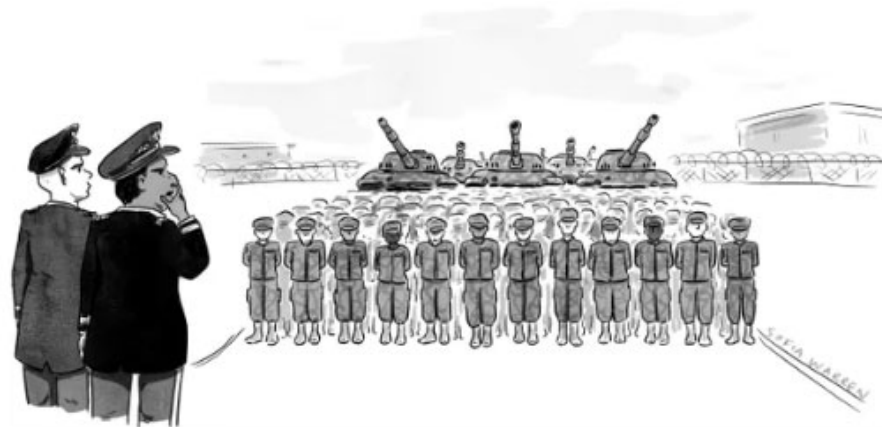
Standard	BPS Standard Number
Type	First, Second, or Third Order
Safety or Essential	Safety or Essential indication
Rating Basis	Self-Study, File Review, or Interview
Rating Documentation	Policy, Narrative, Report, Analysis, Plans
Recent Practice	Review of most recent practice allowed
MIS report	Title of MIS report
Description	Rating indicator description
Tips	Tips as found in BPS
Narrative Detail	Narrative details from Table of Documentation
HFNY CA Tracking	Tracked via ASR, Site Visit, PI/PTs, Quarterlies



What to expect...

Narrative Boilerplate Language

- CA will develop boilerplate language for certain standards
 - Standardization
 - Ease of use



“Is it too matchy-matchy?”

What to expect...

Narrative Boilerplate Language

BPS 1-1.A – requires a narrative that describes

1. Eligibility criteria
2. Reasons for criteria
3. Defined service area
4. Capacity

HFNY Standard Eligibility

Pregnant and parenting families with Target Child under 3 mos of age

Low income, under 21, unmarried, late or no prenatal care

Targeted zip codes due to above criteria



What to expect...

Narrative Boilerplate Language

So, remember to...



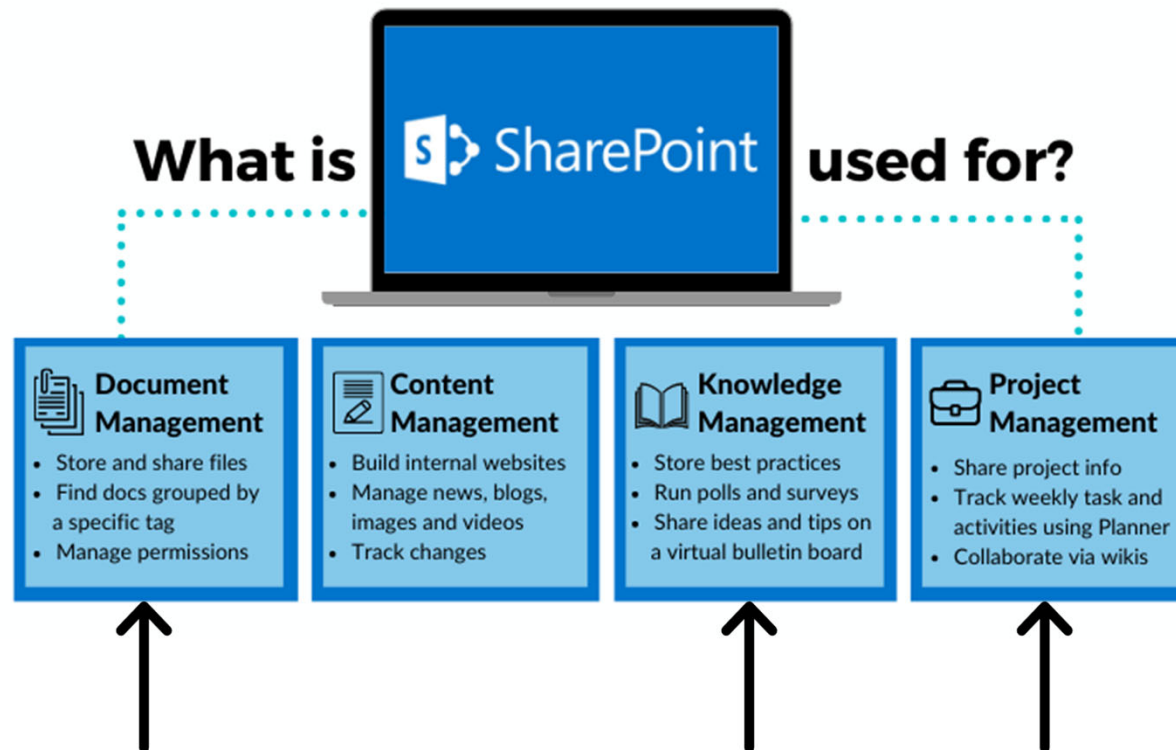
shutterstock.com · 323186687

What other support can we expect?



SharePoint

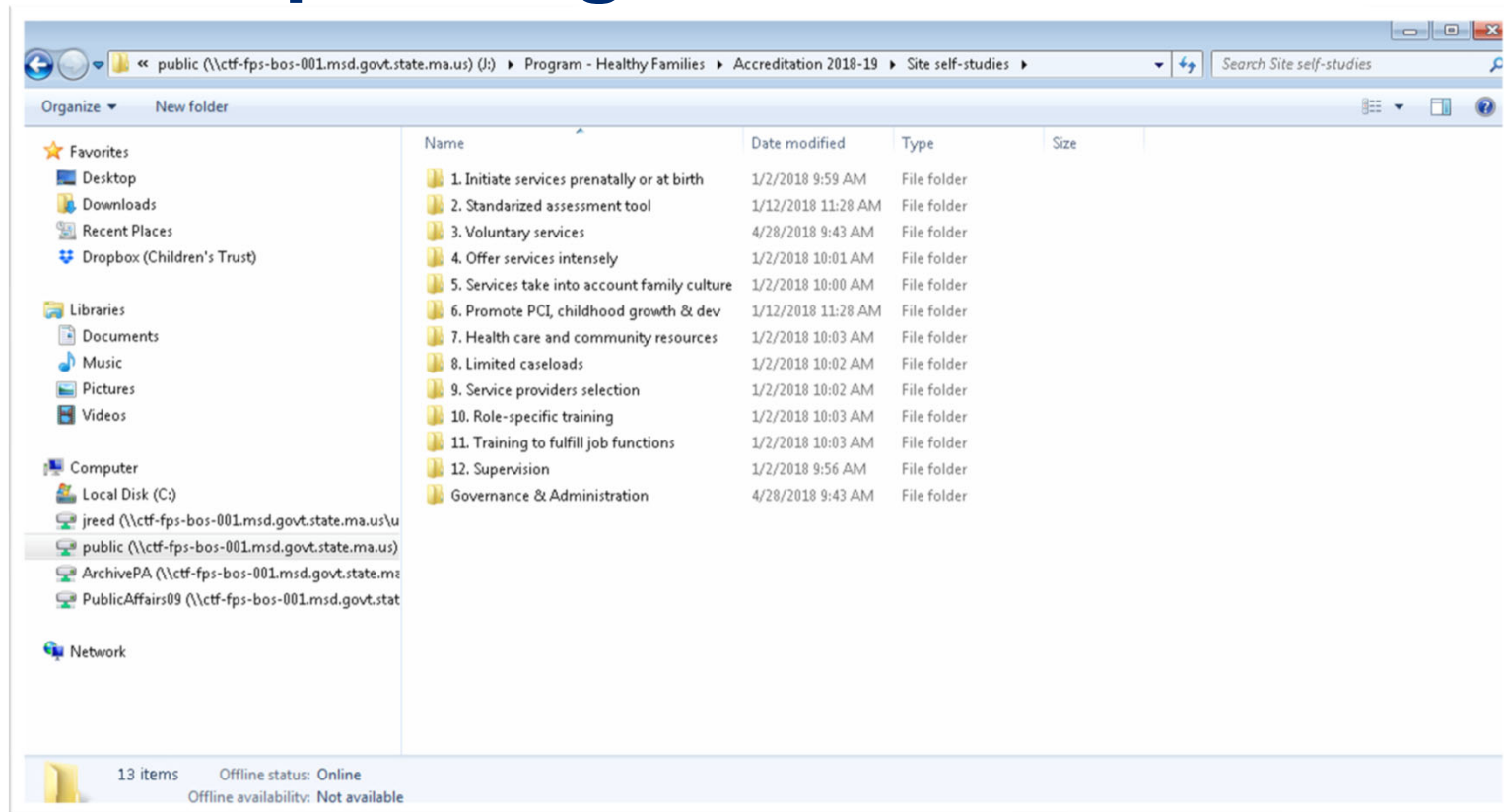
Online sharing with real time comments and suggestions



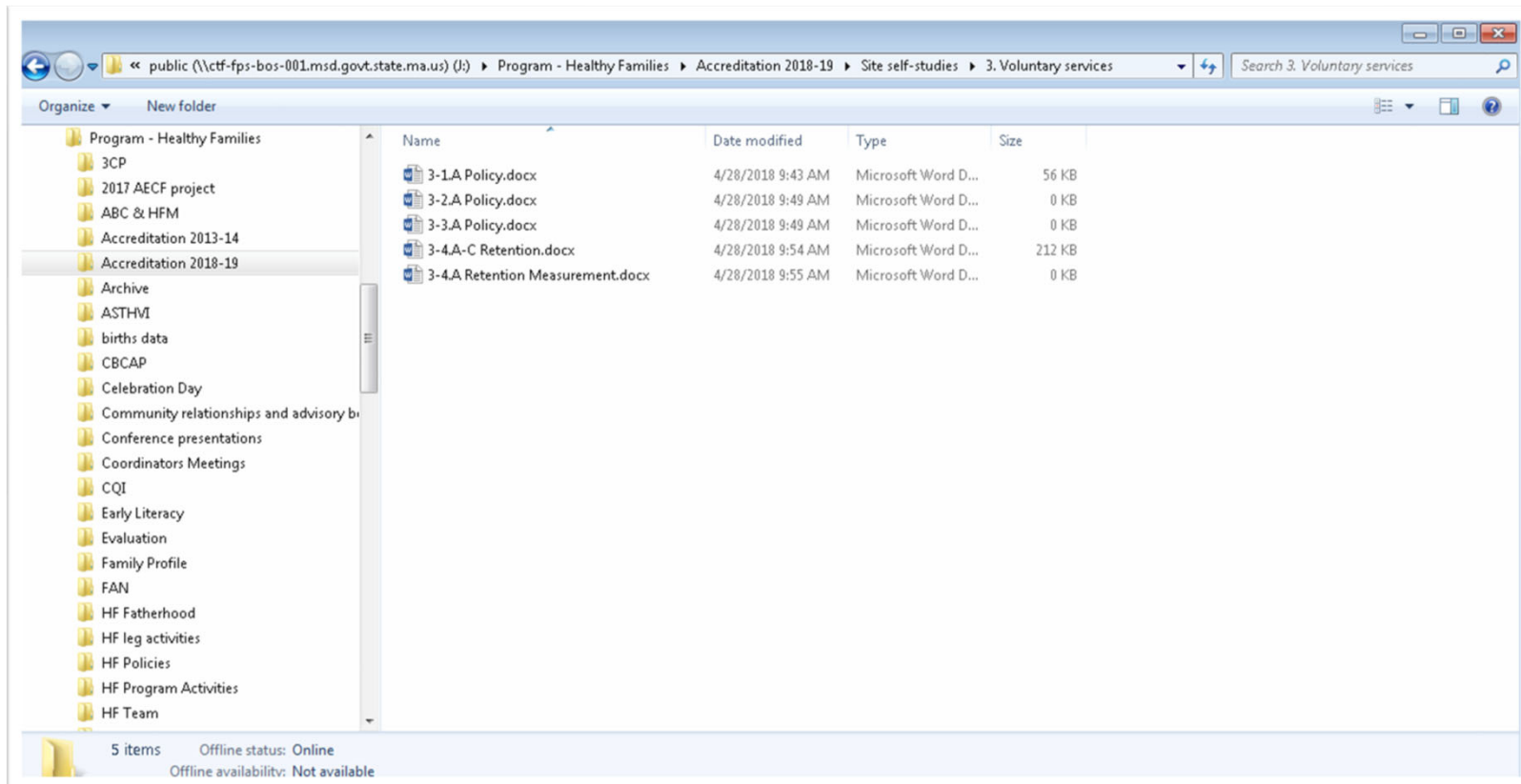
And NO MORE mailed thumb drives!!!



We'll set up an organizational structure



Follow saving parameters & keep it “clean”



What is expected of me?

***Supporting Families
Right From the Start***



**Office of Children
and Family Services**



"Instead of a weighted blanket, she sleeps under the suffocating weight of her responsibilities."

Take it step-by-step

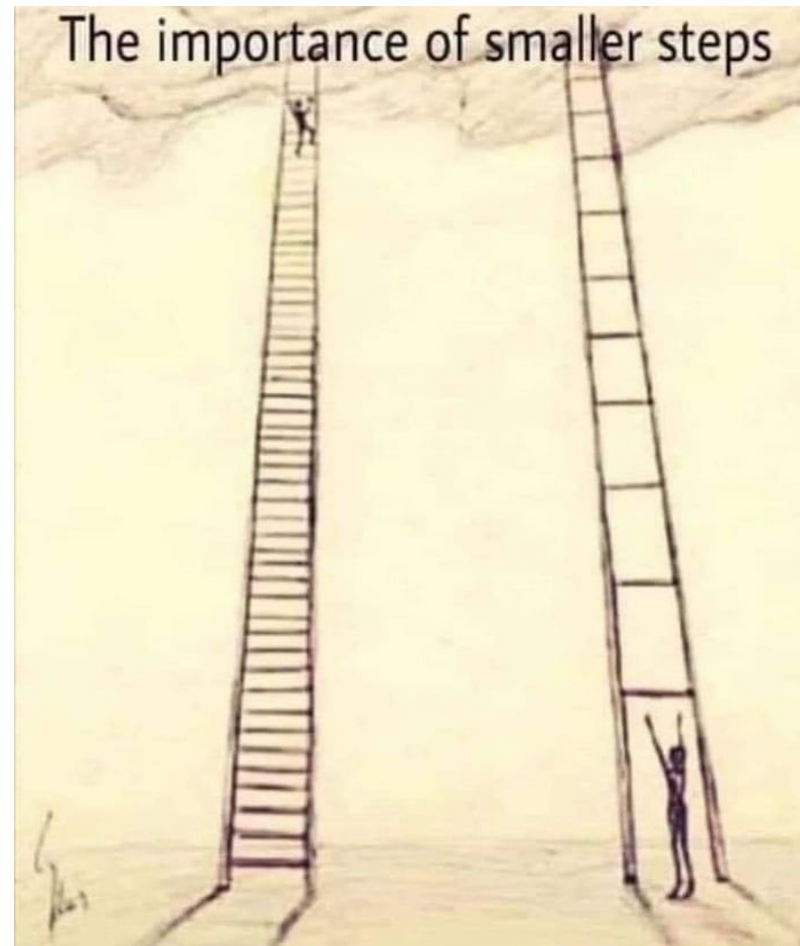
- Put all 101s on your calendar or schedule time to review recording
- Stay in touch with your cohort and Peer Reviewer (PCM)
- Check Sharepoint regularly
- Review Best Practice Standards and tools prior to 101s
- Attend 101s (watch recording) and office hours
- Complete assigned monthly tasks by due date
- Regularly integrate new knowledge and feedback into your self-study
- Complete your self-study and keep your files clean and updated
- ASK, ASK, ASK as many questions as you need
- AND ASK for help whenever you need it



“The secret of getting ahead is getting started. The secret of getting started is breaking your complex overwhelming tasks into small manageable tasks, and starting on the first one.”

- Mark Twain

HFNY CA is hoping that our support throughout this process helps you break down the big task of accreditation into small manageable tasks.



What do I need to start
doing now?

***Supporting Families
Right From the Start***



Office of Children
and Family Services

By March 15th, 2023

- Review standards 1, 2, and 3
- Have anyone who will be helping you with accreditation watch this recording
- Reach out to your Accreditation PCM if they have not reached out to you yet
- Respond to any of your Accreditation PCM's requests (doodle polls, emails, phone calls, etc)
- Review current finalized HFNY policies (specific focus on BPS 1, 2, & 3)
 - Make any necessary changes to site procedures

Thank you for your time!
Questions?

Please do not hesitate to reach out:
Claudia.Miranda-Julian@ocfs.ny.gov

***Supporting Families
Right From the Start***



Office of Children
and Family Services