

Health and Human Services Agency California Department of Public Health



Erica Pan, MD, MPHDirector and State Public Health Officer

Gavin Newsom
Governor

April 25, 2025

TO: MATERNAL, CHILD AND ADOLESCENT HEALTH (MCAH)
DIRECTORS/CALIFORNIA HOME VISITING PROGRAM (CHVP) DIRECTORS,
COORDINATORS, OR DESIGNEES

RE: CHVP AGREEMENT FUNDING APPLICATION (AFA) ANNOUNCEMENT FOR STATE FISCAL YEAR (SFY) 2025-2026

This letter announces the SFY 2025-2026 AFA process that provides allocation and contract funding updates for the California Department of Public Health, Maternal, Child and Adolescent Health (CDPH/MCAH) Division's California Home Visiting Programs.

SFY 2025-2026 funding for CHVP programs are as follows:

Maternal, Infant, and Early Childhood Home Visiting (MIECHV)

Agreement number: CHVP 25-XX

State General Fund Evidence Based Home Visiting (SGF EBHV)

Agreement number: CHVP SGF EBHV 25-XX

State General Fund Innovation Project (SGF INNV 1.0)

- Agreement number: CHVP SGF INNV 25-XX
 State General Fund Innovation Project (SGF INNV 2.0)
 - Agreement number: CHVP SGF INNV 25b-XX

Title XIX (TXIX) Funding (if applicable) – There is no cap on the amount you may request, so long as the agency has the State General Funds and/or available agency funds to match TXIX. Additionally, the agency's spending plan shall reflect the agency's ability to spend all of the TXIX amount requested. Fi\$Cal requirements impose a March 31st deadline for all budget revisions (BR) containing a change (either an increase or decrease) in TXIX funding. This aligns with the Division's requirement to submit all BRs by March 31st of the Fiscal Year. Note: BR requests will not be accepted until after a Q2 invoice has been submitted.

Please note:



CHVP funding allocations cannot be combined but may be braided. Please reach out to your <u>Program Consultant (PC)</u> for more information.

A new Scope of Work (SOW) and budget template will be provided for each initiative (i.e., MIECHV, SGF EBHV, INNV 1.0, and INNV 2.0) on an annual basis. Please reach out to your PC and Contract Liaison (CL) if you have questions.

AFA Timeline/Important Dates:

Friday, April 25,	Release of CHVP SFY 25-26 AFA Notification
2025	The AFA package is included in this email.
	Follow the guidelines set forth on the AFA Checklist regarding what is or is not <i>required</i> for submission.
	Please only complete the budget template and SOW applicable to your County's funding streams (i.e. counties with MIECHV and INNV 1.0 funding will only complete the MIECHV and INNV budget template and the MIECHV and INNV 1.0 SOW).
Friday, May 2, 2025	Last Day to Register for your AFA Development Support and Budget Training Meeting – Optional meetings can be scheduled for technical assistance necessary to complete local agency budgets. Please reach out to your CL and PC via email to request a meeting.
	If a meeting is requested, Local CHVP Program and Fiscal representatives with decision making authority are required to attend.
	CHVP AFA budget meetings will be offered via TEAMS.

	Meetings will be scheduled on a first-come, first-served basis between:
	May 5, 2025 and May 16, 2025
Monday, May 5, 2025 - Friday, May 16, 2025	CHVP Development Support and Budget Training Meetings (Optional)
Friday, May 23, 2025	AFA Packages Due back to CDPH/CHVP
Monday, May 26, 2025	CHVP CL/PC AFA Package Review and Approval process begins

AFA Submission:

Packages are due via email to MCAHFINACT@cdph.ca.gov by Friday, May 23, 2025. Please refer to the AFA Checklist instructions for guidance on how to submit your AFA package. If you have any questions about the AFA process please contact your CL and PC as soon as possible.

Agencies that opt-in to claiming TXIX and are utilizing a Medi-Cal Percentage (MCP) other than base must submit a signed justification letter, which provides the rationale for the intended MCP. This letter must be on county letterhead and include your justification in claiming each of the various MCPs that are being requested on your budget. Please note, the letter will not replace the MCP justification area for personnel on the budget template. We have provided an example letter for your reference titled "Bean County" letter. Agencies will be authorized via email to invoice for services after their AFA packages are approved and an approval letter is in place.

We recommend that all LHJs review the <u>Fiscal Administration Policy and Procedure</u> <u>Manual</u> prior to building and submitting their SFY 25-26 AFAs, as it contains the current fiscal policies. Older versions should not be referenced.

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LHJs will be notified via email when their AFA package is approved. At that time, they will be permitted to invoice for services retroactively to July 1, 2025, if applicable.

Invoice Submission:

All invoices and supporting documentation must be submitted via email to the MCAH invoice box: MCAHInvoices@cdph.ca.gov. To ensure appropriate processing, please use the following invoice naming convention for the signed invoice PDF and Excel files, as well as the subject line of the email:

Agreement Number (space) LHJ Name (space) Fiscal Year (space) Invoice Quarter Number

Example: CHVP SGF EBHV 25-01 Alameda SFY25-26 Q1

Invoice submission must include:

- Signed cover letter noting invoice amount, invoice period, remit to address, and any personnel changes
- Signed invoice
- Excel version of the invoice
- Signed and completed TXIX Cover Sheet (if applicable)
- Signed and completed TXIX Attestation form (if applicable)
- TXIX time studies (if applicable)

Invoice Submission Timeline:

Pay Period	Duration	Due Date
Quarter 1	July – September	November 15 th
Quarter 2	October – December	February 15 th
Quarter 3	January – March	May 15 th
Quarter 4	April – June	August 15 th

MCAH Partners April 25, 2025

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Thank you for your assistance and timely submission of your AFA package. If you have any questions or concerns, please contact your <u>Contract Liaison and Program</u> <u>Consultant</u>.

Sincerely,

Sydney Armendariz, Director

Maternal Child and Adolescent Health Division

Center for Family Health

California Department of Public Health

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH MATERNAL, CHILD AND ADOLESCENT HEALTH (MCAH) DIVISION

FUNDING AGREEMENT PERIOD FY 2025-2026

AGENCY INFORMATION FORM

Agencies are required to submit an electronic and signed copy (original signatures only) of this form along with their Annual AFA Package.

Agencies are required to submit updated information when updates occur during the fiscal year. Updated submissions do not require certification signatures.

Any program related information being sent from the CDPH MCAH Division will be directed to all Program Directors.

AGENCY IDENTIFICATION INFORMATION

Please select the agreement or contract number for each of the applicable programs

MIECHV CHVP 25-10

SGF EBHV CHVP SGF EBHV 25-10

SGF INNV 1.0 N/A

SGF INNV 2.0 N/A

1			
	Update Effective Date (only required when submit	ting updates) ————————————————————————————————————	
Federal Empl	oyer ID#:	FI\$CAL ID#:	
Complete Offi	County of Fresno		
Business Offic	ce Address:		
Agency Phone	Update Effective Date (only required when submitting updates) eral Employer ID#:		
Agency Webs	www.fcdph.org ite:		

AGREEMENT FUNDING APPLICATION POLICY COMPLIANCE AND CERTIFICATION

The undersigned hereby affirms that t	he statements contained in the Agreement F	Funding Application (AFA) are true and	complete to the best of the
applicant's knowledge.			
106 of the Health, and Safety code 14000 and 142), and any applicabl related programs will comply with t Participation (FFP) Section. I furt recipients of funds granted to states	nd Adolescent Health (MCAH) programs will (commencing with section 123225), Chapte le rules or regulations promulgated by CDPH the most current MCAH Policies and Proced ther certify that the MCAH related programs is for medical assistance pursuant to Title XIX by be subject to all sanctions, or other remediates and policies with which	rs 7 and 8 of the Welfare and Institution I pursuant to this article and these Chaures Manual, including but not limited will comply with all federal laws and re K of the Social Security Act (42 U.S.C.	ons Code (commencing with Sections apters. I further certify that all MCAH to, Administration, Federal Financial gulations governing and regulating section 1396 et seq.). I further agree
	regulations, and policies with which	The read of the comply.	
-	y to a CHVP Agreement		12/9/25 Date: 12/9/25
icial authorized to commit the Agency me (Print): Ernest Buddy Mendes ginal Signature of MCAH Director	y to a CHVP Agreement Title: Chairman of the Board of Supervise		

BERNICE E. SEIDEL

Clerk of the Board of Supervisors County of Fresno, State of California

_Deputy

☐ CHECK BOX if remittance address is the same as above

NO

Has Remittance Address changed from previous Fiscal Year? If YES: Complete CDPH9083 (Item 13 on AFA Checklist)

	REMITTANCE ADDRESS				
A	LL PAYMENTS FROM CDPH TO THE CONTRACTOR SHALL BE SENT TO THE FOLLOWING ADDRESS				
Contractor: County of Fresno					
Attention: "Cashier"	Division Manager				
Address:	PO BOX 11867, Fresno, CA 93775-1867				
Contact Number:	(559) 600-6438				
Email:	dphboap@fresnocountyca.gov				

Either party may make changes to the information above by giving written notice to the other party.

Said changes shall not require an amendment to this agreement but will require a new STD204 Payee Data Record or CDPH9083 Government Agency Taxpayer Form.

Always include this remittance address on your invoice.

	MIECHV				AUTHO	ORIZED TO SIGN?	建筑是	
Contact	First Name	Last Name	Title	Budgets	Invoices	IF YES SELECTED, SIGN	Phone	Email Address
AGENCY EXECUTIVE DIRECTOR	David	Luchini	Public Health Director	YES	YES	Mind It	(559) 600-3200	dluchini@fresnocountyca.gov
MCAH DIRECTOR	Ge	Vue	MCAH Director Division Manager	YES	YES		(559) 600-6340	gevue@fresnocountyca.gov
PROJECT COORDINATOR	Jennifer	Day	Supervising Public Health Nurse	NO	NO		(559) 600-5225	jday@fresnocountyca.gov
FISCAL OFFICER	Irene	Parada	Division Manager	YES	YES	(OR	(559) 600-6438	iparada@fresnocountyca.gov
FISCAL CONTACT	Chashua	Lor	Senior Staff Analyst	YES	YES	A Da	(559) 600-6961	chlor@fresnocountyca.gov
CLERK OF THE BOARD or	Bernice	Seidel	Clerk of the Board of Supervisors	NO	NO		(559) 600-1601	bseidel@fresnocountyca.gov
CHAIR BOARD OF SUPERVISORS	Ernest Buddy	Mendes	Chairman of the Board of Supervisors of the County of	NO	NO		(559) 600-4000	district4@fresnocountyca.gov
OFFICIAL AUTHORIZED TO COMMIT AGENCY	Ernest Buddy	Mendes	Chairman of the Board of Supervisors of the County of	NO	NO		(559) 600-4000	district4@fresnocountyca.gov
ADDITIONAL CONTACTS								
				Select Ye	Select Ye			
				Select Ye	Select Ye			

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建筑	SGF EBHV				AUTHO	RIZED TO SIGN?	F 1 - 1	
Contact	First Name	Last Name	Title	Budgets	Invoices	IF YES SELECTED, SIGN	Phone	Email Address
AGENCY EXECUTIVE DIRECTOR	David	Luchini	Public Health Director	YES	YES	Mid Ji	(559) 600-3200	dluchini@fresnocountyca.gov
MCAH DIRECTOR	Ge	Vue	MCAH Director Division Manager	YES	YES	9	(559) 600-6340	gevue@fresnocountyca.gov
PROJECT COORDINATOR	Jennifer	Day	Supervising Public Health Nurse	NO	NO	l	(559) 600-5225	jday@fresnocountyca.gov
FISCAL OFFICER	Irene	Parada	Division Manager	YES	YES	(QP	(559) 600-6438	iparada@fresnocountyca.gov
FISCAL CONTACT	Chashua	Lor	Senior Staff Analyst	YES	YES	42	(559) 600-6961	chlor@fresnocountyca.gov
CLERK OF THE BOARD or	Bernice	Seidel	Clerk of the Board of Supervisors	NO	NO		(559) 600-1601	bseidel@fresnocountyca.gov
CHAIR BOARD OF SUPERVISORS	Ernest Buddy	Mendes	Chairman of the Board of Supervisors of the County of Fresno	NO	NO		(559) 600-4000	district4@fresnocountyca.gov
OFFICIAL AUTHORIZED TO COMMIT AGENCY	Ernest Buddy	Mendes	Chairman of the Board of Supervisors of the County of Fresno	NO	NO		(559) 600-4000	district4@fresnocountyca.gov
ADDITIONAL CONTACTS							Section 18 Section 18	
				Select Ye	Select Ye			
				Select Ye	Select Ye			

ORIGINAL Public Health (COP) Maternal, Child and Adolescent Health Division **BUDGET SUMMARY BUDGET BUDGET STATUS BUDGET BALANCE FISCAL YEAR** 2025-26 **ORIGINAL ACTIVE** 0.00 Version 7.0 - 150 Quarterly 4.1.25 Program: California Home Visiting Program (MIECHV) NON-ENHANCED **ENHANCED UNMATCHED FUNDING** Agency: CHVP 25-10 FRESNO **MATCHING (50/50) MATCHING (75/25)** SubK: CHVP - MIECHV AGENCY FUNDS CHVP-Cnty NE CHVP-Cnty E (1) (7) (10)(11)(14) (15) Combined Combined TOTAL FUNDING % CHVP - MIECHV % % Agency Funds⁴ Fed/Agency Fed/Agency* ALLOCATION(S) 895,429.00 **#VALUE! EXPENSE CATEGORY** (I) PERSONNEL 775,483.57 775,483.57 0.00 0.00 0.00 (II) OPERATING EXPENSES 0.00 0.00 0.00 0.00 0.00 (III) CAPITAL EXPENDITURES 0.00 0.00 0.00 0.00 0.00 (IV) OTHER COSTS 0.00 0.00 0.00 0.00 0.00 (V) INDIRECT COSTS 119,945.43 119,945.43 0.00 0.00 0.00 **BUDGET TOTALS*** 895,429.00 100.00% 895,429.00 0.00% 0.00 0.00% 0.00 0.00% 0.00 BALANCE(S) 0.00 **TOTAL CHVP - MIECHV** 895,429.00 895,429.00 TOTAL TITLE XIX 0.00 [50%] 0.00 [75%] 0.00 **TOTAL AGENCY FUNDS** 0.00 [50%] 0.00 0.00 0.00

895,429.00

Maximum Amount Payable from State and Federal resources

WE CERTIFY THAT THIS BUDGET HAS BEEN CONSTRUCTED IN COMPLIANCE WITH ALL MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

MCAH/PROJECT DIRECTOR'S SIGNATURE

\$

128/32

DATE

AGENCY FISCAL AGENT'S SIGNATURE

28/25 DATE

These amounts contain local revenue submitted for information and matching purposes. MCAH does not reimburse Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT		CHVP - MIECHV	AGENCY FUNDS	CHVP-Cnty NE	CHVP-Cnty E
A CONTRACTOR OF THE CONTRACTOR	PCA Codes	53128		53162	53163
(I) PERSONNEL		775,483.57		0.00	0.00
(II) OPERATING EXPENSES		0.00		0.00	0.00
(III) CAPITAL EXPENSES		0.00		0.00	0.00
(IV) OTHER COSTS		0.00		0.00	0.00
(V) INDIRECT COSTS		119,945.43		0.00	0.00
Totals for PCA Codes	895,429.00	895,429.00		0.00	0.00

Public Health July Maternal, Child and Adolescent Health Division

Program:	California Home Visiting Program (MIECHV)			UNMATCHE	D FUND	ING		-ENHANCED		HANCED	
Agency: SubK:	CHVP 25-10 FRESNO		CU	VP - MIECHV		ENCY FUNDS		CHING (50/50)		HING (75/25)	
SubK.		(1)	(2)		(6)	(7)	(10)		(14)	HVP-Cnty E (15)	
		TOTAL FUNDING	%	(3) CHVP - MIECHV	(°) %	Agency Funds*	%	(11) Combined	0/.	Combined	
(W) ODEE	DATING EVENING DETAIL	TOTAL FORDING	70	CHVF - MILCHV	/0	Agency Funds		Fed/Agency*	/0 % TRA	Fed/Agency*	% PERSONNEL MATCH
(II) OPER	RATING EXPENSES DETAIL							0.00%		0.00%	0.00%
T	TOTAL OPERATING EXPENSES	0.00		0.00		0.00		0.00		0.00	Match Available
TRAVEL				0.00		0.00		0.00		0.00	
TRAININ	VG			0.00		0.00		0.00		0.00	
1 2			-	0.00		0.00		0.00			
3				0.00		0.00		0.00			
4				0.00		0.00		0.00			
5	THE PART OF THE PA			0.00		0.00		0.00			
6				0.00		0.00		0.00			
7				0.00		0.00		0.00			
8				0.00		0.00		0.00			
9				0.00		0.00		0.00			
10				0.00		0.00		0.00			
11				0.00		0.00		0.00			
12	· · · · · · · · · · · · · · · · · · ·			0.00		0.00		0.00			
13				0.00		0.00		0.00			
14				0.00		0.00		0.00			
15 Unmatche	d Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched	Title V (Col. 3), State G	eneral Fund	0.00 s (Col. 5), and/or Age	ency (Col. 7	0.00) funds		0.00			
			1	,,,		,					7
(III) CAP	ITAL EXPENDITURE DETAIL										
	TOTAL CAPITAL EXPENDITURES			0.00		0.00		0.00			
											% PERSONNEL MATCH
(IV) OTH	ER COSTS DETAIL										0.00%
	TOTAL OTHER COSTS	0.00		0.00		0.00		0.00		0.00	
	NTRACTS										
1				0.00		0.00		0.00		0.00	
2 3				0.00		0.00		0.00		0.00	H .
4				0.00		0.00		0.00		0.00	
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8				0.00		0.00		0.00		1 0	
OTHER	CHARGES							1	1	1	Match Available
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2				0.00		0.00		0.00			
3		-		0.00		0.00		0.00			
5				0.00		0.00		0.00			
6				0.00		0.00		0.00			
7				0.00		0.00		0.00	1		
8	·		-	0.00		0.00		0.00	1		
			L	0.00		0.00	Ц	0.00	L		1
(V) INDIF	RECT COSTS DETAIL										1
	TOTAL INDIRECT COSTS	119,945.43		119,945.43		0.00	1	0.00			-
15.47		119,945.43	100.00%			0.00	_		4		
		1	1		1	5.00	0.007	0.00	L		

Public Health Naternal, Child and Adolescent Health Division

Program:	California Home Visiting Program (MIECHV)		UNMATCHED FUNDING				NON	I-ENHANCED	E	NHANCED
Agency:	CHVP 25-10 FRESNO		ONWATCHED FONDING			iNG	MATCHING (50/50) CHVP-Cnty NE		· · · · · · · · · · · · · · · · · · ·	
SubK:			CHVP - MIECHV		AGE	NCY FUNDS				
		(1)	(2)	(3)	(6)	(7)	(10)	(11)	(14)	(15)
Agency:		TOTAL FUNDING	%	CHVP - MIECHV	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*

				TOTALTONDING		CHALL MIECHA	/0	Agency Funds	/0	Fed/Agency*	/6	Fed/Agency*	I	
PERSONNEL DETAIL														
			NEL COSTS	775,483,57		775,483.57		0.00		0.00		0.00		
	FRINGE BENEFIT RATE),36%	320,270.57		320,270.57		0.00		0.00		0.00		
r		-	TOTAL WAGES	455,213.00		455,213.00		0.00		0.00		0.00	щ.	
FULL NAME (First Name Last Name)	TITLE OR CLASSIFICATION (No Acronyms)	% FTE	ANNUAL SALARY	TOTAL WAGES									J-Pers MCF Per Staff	
Ge Vue	MCAH Director/Division Manager (in-kind)	15.00%	0.00	0.00		0.00		0.00		0.00		0.00	82.70%	
Jennifer Day	Supervising Public Health Nurse	35.00%	162,768.84	56,969.00	100.00%	56,969.00		0.00		0.00		0.00	82.70%	Ť
Sunshine Harder	Public Health Nurse II	100.00%	132,748.46	132,748.00	100.00%	132,748.00		0.00		0.00		0.00	82.70%	T
Cindy Deisher	Public Health Nurse II	100.00%	132,748.46	132,748.00	100.00%	132,748.00		0.00		0.00		0.00	82.70%	T
Shelley Teske	Public Health Nurse II	100.00%	132,748.46	132,748.00	100.00%	132,748.00		0.00		0.00		0.00	82.70%	T
Yolanda Garza	Office Assistant II (in-kind)	100.00%	0.00	0.00		0.00		0.00		0.00		0.00	82.70%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	J
				0.00		0.00		0.00		0.00		0.00	0.00%	J
				0.00		0.00		0.00		0.00		0.00	0.00%	I
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
400				0.00	3	0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	1
-				0.00		0.00		0.00		0.00		0.00	0.00%	
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
-				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00		0.00	0.00%	1
				0.00		0.00		0.00		0.00)	0.00	0.00%	T
				0.00		0.00		0.00		0.00		0.00	0.00%	, 1
2				0.00		0.00		0.00		0.00		0.00	0.00%	T



July 1, 2025- June 30, 2026

The purpose of this Scope of Work (SOW) is to provide guidance and outline requirements for implementing early childhood home visiting services in the California Department of Public Health/California Home Visiting Program (CDPH/CHVP) funded by the federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grant. CHVP MIECHV-funded local health jurisdictions (LHJs) may implement Healthy Families America (HFA) and/or Nurse-Family Partnership (NFP) evidence-based home visiting (EBHV) programs with fidelity to the model and in accordance with federal MIECHV and State requirements to achieve positive outcomes. The SOW includes the following goals:

- 1. Provide leadership and structure to implement CHVP in funded LHJs
- 2. Integrate the home visiting program into the local early childhood system
- 3. Monitor federal benchmark measures to demonstrate improvement in maternal and early childhood health



July 1, 2025- June 30, 2026

Goals, Objectives, Activities and Deliverables for July 1, 2025 – June 30, 2026

Goal 1	Goal 1: Provide leadership and structure to implement CHVP in the LHJ				
#	Objective	Activities	Deliverables		
1.1	The LHJ Maternal, Child, and Adolescent Health (MCAH) Director or designee will provide effective leadership and oversight of CHVP ¹	 (a) Provide leadership and oversight on all matters related to the development, implementation, operation, administration, and reporting for local implementation of home visiting programs following CDPH/CHVP policies and procedures (P&P) and EBHV model requirements (b) Attend quarterly CHVP Director calls (c) Participate in ongoing CAB meetings, other local community groups, site visits, meetings, and conferences as directed by CDPH/CHVP 	 Submission of: Progress Reports CAB meeting materials Staffing Reports Participation in: Quarterly CHVP Director calls Virtual and/or in-person site visits every two years² 		
1.2	The LHJ will implement home visiting services, and conduct at least 75% of all home visits in person, using culturally responsive practices to ensure that all interactions, interventions, and service deliveries effectively meet the diverse needs of the communities served	 (a) Review the MCAH Title V Needs Assessment to determine the community's equity needs (b) Participate in opportunities designed to enhance cultural sensitivity through webinars, trainings, and/or conferences 	 Submission of: Progress Reports Staffing Reports Staff training logs Collect and submit Priority Population Data (NFP only) 		



	Goal 1: Provide leadership and structure to implement CHVP in the LHJ				
#	Objective	Activities	Deliverables		
		(c) Provide culturally responsive services that address the identified cultural needs of families (e.g. literacy levels, disabilities, military families, grandparents, tradition, etc.)	Data showing that at least 75% of home visits were conducted in- person		
		(d) Provide documents in the family's preferred language, when feasible			
		(e) Provide translation services when needed			
		(f) Documents should be written in no more than an eighth grade reading level and use plain language			
		(g) Recruit and hire staff that reflect the community served and/or speak the language of program participants, when possible			
		(h) Prioritize populations identified by the Health Resources and Services Administration (HRSA) MIECHV program as high-risk populations ³			
		(i) Conduct at least 75% of all home visits in person			



Goal 1	Goal 1: Provide leadership and structure to implement CHVP in the LHJ				
#	Objective	Activities	Deliverables		
1.3	The LHJ will hire, train, and retain staff to comply with selected home visiting model requirements and CDPH/CHVP P&Ps	 (a) Participate in model required trainings related to screening tools, health assessments, reflective supervision, data collection tools, and software (b) Maintain full staffing capacity to serve families in the home visiting program and adhere to model requirements (c) All staff will sign a confidentiality agreement at the time of hire and annually thereafter (d) All staff directly serving families will complete mandated reporter training and comply with all mandated reporter requirements 	 Submission of: Progress Reports Staffing Reports Training plans Training logs Confirmation of a signed county confidentiality agreement for each applicable staff member 		
1.4	The LHJ will ensure the home visiting program reaches and maintains contracted caseload capacity (CC)	 (a) Develop and sustain relationships with appropriate agencies to obtain home visiting participant referrals (b) Develop a referral triage process for incoming home visiting participants to ensure families are connected to the program that best meets their needs 	 Submission of Progress Reports Outreach activity logs or plan Referral triage plans outlining referral process (flow chart, narrative, etc.) 		



Goal 1	Goal 1: Provide leadership and structure to implement CHVP in the LHJ				
#	Objective	Activities	Deliverables		
		 (c) Ensure newly enrolled participants provide informed consent and sign a CHVP Participant Consent Form at enrollment (d) Develop and utilize a P&P on reaching out to disengaged families in accordance with CDPH/CHVP P&P 100-50 	 Confirmation of signed CHVP Participant Consent Form for each enrolled participant Data on participant enrollment and accurate funding information entered into the data system in a timely manner 		
1.5	The LHJ will provide oversight and leadership to ensure selected home visiting model fidelity and quality assurance	 (a) Implement evidence-based home visiting model requirements in accordance with the selected model(s) fidelity standards (b) Monitor subcontracted agencies to ensure model fidelity standards are met (if applicable) (c) LHJs interested in implementing a modelapproved enhancement must obtain written approval from CDPH/CHVP prior to 	Model developer agreement, accreditation, and/or affiliation documentation		
		implementation			
1.6	The LHJ will develop and implement home visiting P&Ps and follow all applicable MCAH and CDPH/CHVP P&Ps	(a) Develop and conduct an annual review of local P&Ps related to home visiting and update as needed	Submission of: Progress Reports		



Goal :	Goal 1: Provide leadership and structure to implement CHVP in the LHJ				
#	Objective	Activities	Deliverables		
		 (a) Conduct an annual review of, and ensure compliance with, the CDPH/CHVP P&Ps (b) Conduct an annual review of, and ensure compliance with, the Local MCAH Programs Policies and Procedures (c) Conduct an annual review of, and ensure compliance with, the MCAH Fiscal Administration P&P Manual 	 Updated LHJ P&Ps related to home visiting Annual confirmation of review of CDPH/CHVP P&Ps, Local MCAH Program Policies and Procedures, and the MCAH Fiscal Administration Policy & Procedure Manual 		
1.7	The LHJ will participate in TA meetings and conduct Continuous Quality Improvement (CQI) projects and activities to support program implementation and improvement goals	 (a) Participate in quality improvement activities as directed by CDPH/CHVP (b) Attend all meetings and site visits, including but not limited to: Individual TA meetings Model TA meeting All LHJ TA meeting Ad hoc TA meetings 	 Submission of: Progress Reports CQI monitoring reports, data, and other requested information Participation in: Individual and group TA meetings CQI meetings and Learning Collaborative presentations 		



July 1, 2025- June 30, 2026

Goal 1:	Goal 1: Provide leadership and structure to implement CHVP in the LHJ				
#	Objective	Activities	Deliverables		
		 In-person or virtual site visit as scheduled by CDPH/CHVP 			
		(c) Use data to inform and improve program activities			

¹The MCAH Director or their designee is required to devote a minimum of 0.05 full-time equivalent (FTE) and a maximum of 0.15 FTE to CHVP oversight, fostering partnerships and collaboration within the LHJ, and directing the local CHVP community advisory board (CAB). The percentage FTE dedicated to CHVP budgets should be deducted from the local MCAH budget to ensure the LHJ does not exceed the MCAH Director FTE requirements as outlined in the *Local MCAH Programs Policies and Procedures*. If an MCAH Director cannot meet the requirements of the CHVP SOWs, they can identify a designee, as outlined in the *Local MCAH Programs Policy and Procedures*. In this situation, the designee, who may be identified as an MCAH Coordinator or other position, can act as the responsible party for CHVP, and should be designated as such on the CHVP budget justification.

²If a LHJ establishes a subcontractor to deliver home visiting services, a LHJ representative (ideally the MCAH Director) must be present during all scheduled group and individual technical assistance (TA) meetings, virtual or in-person visits, and be involved in all programmatic, data, contract, and fiscal communications with CDPH/CHVP. This requirement ensures that the LHJ maintains oversight and direct involvement in all aspects of the contracted services, guaranteeing alignment with CDPH/CHVP standards and expectations. Additionally, no more than 10% of the allocation should be spent on administrative oversight of a subcontractor.



July 1, 2025- June 30, 2026

³As required by the MIECHV Statute, the following populations must be prioritized for services under the MIECHV program:

- · Low-income eligible families
- Eligible families with pregnant women who have not attained age 21
- Eligible families that have a history of child abuse or neglect or have had interactions with child welfare services
- Eligible families that have a history of substance use disorders or are in need of substance use disorder treatment
- Eligible families that have users of tobacco products in the home
- Eligible families that have or have children with low student achievement
- Eligible families with children with developmental delays or disabilities
- Eligible families that include individuals who are serving or formerly served in the Armed Forces, including such families that have members of the Armed Forces who have had multiple deployments outside of the United States



Goal 2	Goal 2: Integrate CHVP into the local early childhood system				
#	Objective	Activities	Deliverables		
2.1	The LHJ will collaborate with local early childhood system partners to ensure a continuum of services for families	 (a) Maintain a CAB that includes local early childhood system partners and meets at least quarterly to establish appropriate linkages to referral and service systems to benefit participating families (b) Meet and work with other local early childhood system and community partners to coordinate services to participating families (c) Develop and implement a transition plan for families according to model guidance and in 	Progress Report including CAB meeting materials and Memoranda of Understanding (MOUs) and/or other written agreements		
2.2	The LHJ will pursue, develop, and maintain relationships with local service agencies and referral resources to facilitate participant recruitment	accordance with CDPH/CHVP P&P 200-40 (a) Develop and maintain MOUs and/or other written agreements (e.g., letters of support) with community agencies and service providers	 Submission of: Progress Report including CAB meeting materials, MOUs, and/or other written agreements Outreach materials Outreach activity logs or plan 		



Goal 3	Goal 3: Monitor federal benchmark measures to show improvement in maternal and childhood health			
#	Objective	Activities	Deliverables	
3.1	The LHJ will collect and submit all information required for HRSA/MIECHV reporting	 (a) Complete all model-issued forms and assessment tools as defined by CDPH/CHVP and model-issued data collection manual(s) (b) Collect and enter federally required priority population data for all participants into the designated data system (c) Submit a complete and accurate quarterly staffing report on time 	Submission of data to meet MIECHV quarterly (Form 4) and annual (Form 1 and Form 2) performance reporting: • Timely and accurate data on participant demographics, service utilization, and performance measures, according to, and with fidelity to, the selected home visiting model guidelines and CHVP requirements • Model required Participant enrollment and funding information • Staffing Reports via SharePoint • Priority Population data via SharePoint (NFP only)	
3.2	The LHJ will maintain clean and compliant data	(a) Accurately collect and submit participant data using selected home visiting model and CHVP required documents	Demonstrated compliance with data related policies and program quality measures	



Goal 3: Mo	Goal 3: Monitor federal benchmark measures to show improvement in maternal and childhood health				
#	Objective	Activities	Deliverables		
		(b) Ensure all data handling complies with CDPH/CHVP's security policies, including necessary encryption, access controls, and regular data system user account audits	 Evidence of data cleaning on a monthly or quarterly basis using the CDPH/CHVP data cleaning schedule Participate in regular TA 		
		(c) Ensure accuracy and completeness of data input into designated data systems using data quality reports and monitoring	meetings and site visits with CDPH/CHVP staff		
		(d) NFP LHJs will coordinate data system requirements with the NFP National Service Office			
		(e) HFA LHJs will coordinate with the CDPH/CHVP data team to establish buildout/modification in Efforts to Outcomes (ETO) data system and will comply with all CHVP HFA Data Collection Manual requirements			
		(f) Collect and enter participant data into designated data systems within seven working days, or as required by the selected home visiting model			



Goal 3: Monitor federal benchmark measures to show improvement in maternal and childhood health				
#	Objective	Activities	Deliverables	
		(g) Provide and/or coordinate with data collection system owners to provide monthly enrollment and other requested reports to CDPH/CHVP as needed		
		(h) Correct data entry errors and strive to reduce missing data as directed by the CDPH/CHVP data team as needed		



Monitoring Mechanism	Due Date
All reports and documentation must be submitted via SharePo	int, unless otherwise directed by CHVP
Staffing Report	 July 15, 2025 (for SFY 2024-2025) October 15, 2025 January 15, 2026 April 15, 2026
 CAB roster, minutes, and agendas MOUs or other written agreements with community agencies and service providers Outreach materials Outreach activity logs or plan Training plans and logs Policies and Procedures Referral triage plan Confirmation of signed CDPH/CHVP Participant Consent Forms Confirmation of signed confidentiality agreements for all direct staff Confirmation of completed mandated reporter training Model Developer agreement, accreditation, and/or affiliation documentation 	 July 15, 2025 January 15, 2026
Priority Population data via SharePoint NFP only Participant data collection is continuous	 July 15, 2025 (FFY 2024-2025 to date) October 15, 2025 (Final FFY 2024-2025) January 15, 2026 (FFY 2025-26 to date)



July 1, 2025- June 30, 2026

Monitoring Mechanism	Due Date
All reports and documentation must be submitted via SharePo	oint, unless otherwise directed by CHVP
Update data on SharePoint quarterly	April 15, 2026 (FFY 2025-26 to date)
CQI Learning Collaboratives, monitoring reports, data, and information	Upon request
Individual TA meetings	Semi-annually (TBD)
Model TA meetings	Annually (TBD)
All LHJ meeting	Annually (TBD)
Site visits	Biennially (TBD)

NOTE: If compliance standards are not met in a timely manner, CDPH/CHVP may require the local agency to participate in an Extra Support Plan (ESP) process, and/or may temporarily withhold cash payment pending correction of the deficiency; disallowing all or part of the cost of the activity or action out of compliance; wholly or partly suspending or terminating the award; or withholding further awards.

Ge Vue		6/26/25
MCAH Director Name	MCAH Director Signature	Date

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12,689.30

786,071.26

2,993,981.47

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CAPITAL EXPENSES

OTHER COSTS

INDIRECT COSTS

Totals for PCA Codes

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Public Health --> When Maternal, Child and Adolescent Health Division

ogram: ency:	California Home Visiting Program (EBHV) CHVP 25-10 FRESNO			UNMATCHE	D FUND	ING	NON-ENHANCED MATCHING (50/50)				ENHANCED MATCHING (75/25)				
у. ьК:	CHYF 23-10 FRESHO		CI	IVP - EBHV	AGI	ENCY FUNDS	СН	VP-SGF-NE	201 30	IVP-Cnty NE	СН	IVP-SGF-E		HVP-Cnty E	1
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		TOTAL FUNDING	%	CHVP - EBHV	%	Agency Funds*	%	Combined Fed/State	%	Combined Fed/Agency*	%	Combined Fed/State	%	Combined Fed/Agency*	
OPERATI	NG EXPENSES DETAIL							L NON-ENH MATCH 57.96%				VEL ENH MATCH			% PERSONNE 75.63
	TOTAL OPERATING EXPENSES	221,401.32		54,012.40		0.00		167,388.92		0.00		0.00		0.00	Malch Avi
TRAVEL		4,215.00	25.72%	1,084.10		0.00	74.28%	3,130.90		0.00		0.00		0.00	1.23
TRAINING		6,099.00	24.37%	1,486.33		0.00	75.63%	4,612.67		0.00		0.00		0.00	0.00
Office Supplies		4,500.00	24.37%	1,096.65		0.00	75.63%	3,403.35		0.00					0.00
Postage		339.00	24.37%	82.61		0.00	75.63%	256.39		0.00					0.00
Printing (Duplic	cation)	417.00	24.37%	101.62		0.00	75.63%	315.38		0.00					0.00
Communicatio	n	84,152.00	24.37%	20,507.84		0.00	75.63%	63,644.16		0.00					0.00
Facilities		59,611.00	24.37%	14,527.20		0.00	75.63%	45,083.80		0.00					0.00
Utilities		15,108.32	24.37%	3,681.90		0.00	75.63%	11,426.42		0.00					0.0
Securities		14,254.00	24.37%	3,473.70		0.00	75.63%	10,780.30		0.00					0.0
HFA Affiliation		6,750.00	24.37%	1,644.98		0.00	75.63%	5,105.03		0.00					0.0
NFP Affilitation		25,956.00	24.37%	6,325.48		0.00	75.63%	19,630.52		0.00					0.0
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	rating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatcher	Title V (Col. 3) State 0	Seneral Fun		ency (Col	7) funds		0.00		0.00					
Unmatched Oper	rating Expenses are not eliqible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatcher	Title V (Col. 3), State C	J General Fun		ency (Col.		1	0.00		0.50					
* Unmatched Oper		d Title V (Col. 3), State C	Seneral Fun		ency (Col.			0.00							1
Unmatched Oper	EXPENDITURE DETAIL	d Title V (Col. 3), State C	Seneral Fun	ds (Col. 5), and/or Aq	ency (Col.	7) funds.]
Unmatched Oper		d Title V (Col. 3), State C	Seneral Fun		ency (Col.			0.00		0.00			-	X]
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Unmatched Oper	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL		General Fun	ds (Col. 5), and/or Aq	ency (Col.	7) funds.		0.00		0.00					
Unmatched Oper	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS		General Fun	ds (Col. 5), and/or Aq	ency (Col.	7) funds.						0.00		0.00	
Unmatched Oper	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS		General Fun	0.00 2,558.85	ency (Col.	7) funds. 0.00		7,941.15		0.00				0.00	
Unmatched Oper	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS		General Fun	2,558.85	ency (Col.	7) funds. 0.00 0.00		7,941.15		0.00		0.00		0.00	
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Unmatched Oper	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS		Seneral Fun	2,558.85 0.00 0.00 0.00 0.00 0.00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		7,941.15 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00	
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Unmatched Oper I) CAPITAL // OTHER (SUBCONTRA 1 2 3 4 5 6 7 8 OTHER CHAI	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS ACTS ROBES Valional Materials	10,500.00	24.37%	2,558.85 0.00 0.	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63% 75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75.6 Match 2
V) OTHER (SUBCONTRA 1 2 3 4 5 6 6 7 8 OTHER CHAIL 1 Behavior Moti	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS ACTS ROBES Valional Materials	10,500.00	24.37%	2,558.85 0.00 0.00 0.00 0.00 0.00 0.00 0.	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63% 75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75.6 Match A
V) OTHER (SUBCONTRA 1 2 3 4 4 5 6 7 8 OTHER CHAI	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS ACTS ROBES Valional Materials	10,500.00	24.37%	2,558.85 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 121.85 0.00 0.00 0.00 0.00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63% 75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75,0 Match #
V) OTHER (SUBCONTRA 1 2 3 4 5 6 6 7 8 OTHER CHAIL 1 Behavior Moti	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS ACTS ROBES Valional Materials	10,500.00	24.37%	2,558.85 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 121.85 0,00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75.1 Match 2
Unmatched Oper	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS ACTS ROBES Valional Materials	10,500.00	24.37%	2,558.85 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 121.85 0.00 0.00 0.00 0.00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75. Match
Unmatched Oper I) CAPITAL SUBCONTRA OTHER CHAI Behavior Molir Client Refrest	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS CTS RGES Valional Materials Innent	10,500.00	24.37%	2,558.85 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 121.85 0,00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75.1 Match 2
Unmatched Oper I) CAPITAL SUBCONTRA OTHER CHAI Behavior Molir Client Refrest	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS ACTS ROBES Valional Materials	10,500.00	24.37%	2,558.85 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 121.85 0,00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75.1 Match 2
Unmatched Oper I) CAPITAL // OTHER (SUBCONTRA 1 2 3 4 5 6 7 8 OTHER CHAI 1 Behavior Molir 2 Client Refrest 5 6 7 8 8	EXPENDITURE DETAIL TOTAL CAPITAL EXPENDITURES COSTS DETAIL TOTAL OTHER COSTS CTS RGES Valional Materials Innent	10,500.00	24.37%	2,558.85 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 0,00 121.85 0,00	iency (Col.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	75.63% 75.63%	7,941.15 0.00 0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0		0.00 0.00 0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00 0.00 0.00	75.1 Match 2

ogram:		Visiting Program (EBHV)	ab.				UNMATCHE	D FUND	ING		NON-ENH				ENHA				
jency: ibK:	CHVP 25-10 FRE	ESNO				C	HVP - EBHV		ENCY FUNDS	СН	MATCHIN IVP-SGF-NE		HVP-Cnty NE	CH	MATCHIN		HVP-Cnty E		
					(1)	(2)	(3)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	1	
					TOTAL FUNDING	%	CHVP - EBHV	%	Agency Funds*	%	Combined Fed/State	%	Combined Fed/Agency*	%	Combined Fed/State	%	Combined Fed/Agency*		
) PERSONN	NEL DETAIL																	ĺ	
	122 0217112		OTAL PERSON	NEL COSTS	2,714,032.82		716,810.71		0.00		1,343,180.67		0.00		654,041.44		0.00		
		FRINGE BENEFIT R	ATE 73	.24%	1,147,416.82		303,047.43		0.00		567,859.05		0.00		276,510.34		0.00		
		_		TOTAL WAGES	1,566,616.00		413,763.28		0.00		775,321.62		0.00		377,531.09		0.00	#. -	ling
(Firs	FULL NAME t Name Last Name)	TITLE OR CLASSIFICATION (No Acronyms)	% FTE	ANNUAL SALARY	TOTAL WAGES													J-Pers MCI Per Staff	Staff Trave
1 Ge Vue		MCAH Director/Division Manager	15.00%	177,803.00	26,670.00	35.27%	9,406.51		0.00	54.73%	14,596.49		0.00	10.00%	2,667.00		0.00		x
2 Jennifer Day		Supervising Public Health Nurse	65.00%	162,768.84	105,800.00	17.30%	18,303.40		0.00	51.59%	54,582.22		0.00	31.11%	32,914.38		0.00	94.40%	_
3 Lorraine Hard	у	Supervising Public Health Nurse	85.00%	162,768.84	138,354.00	17.30%	23,935.24		0.00	51.59%	71,376.83		0.00	31.11%	43,041.93		0.00	94.40%	_
4 Lupe Wade		Public Health Nurse II	100.00%	128,882.00	128,882.00	32.21%	41,512.89		0.00	35.49%	45,740.22		0.00	32.30%	41,628.89		0.00	94.40%	
5 Eileen Murry 6 Elizabeth Sole		Public Health Nurse II	100.00%	132,748.46 132,748.46	132,748.00 132,748.00	32.21%	42,758.13 42,758.13		0.00	35.49%	47,112.27		0.00	32.30% 32.30%	42,877.60		0.00	94.40%	
7 Rosa Ybarra-		Public Health Nurse II	100.00%	132,748.46	132,748.00	32.21% 32.21%	42,758.13		0.00	35.49% 35.49%	47,112.27 47,112.27		0.00	32.30%	42,877.60 42,877.60		0.00	94.40%	_
8 Melanie Deto	CONTRICT	Public Health Nurse II Public Health Nurse II	100.00%	132,748.46	132,748.00	26.66%	35,390.62		0.00	32.33%	47,112.27		0.00	41.01%	54,439.95		0.00	94.40%	_
9 Bridget Balles	steros	Public Health Nurse II	100.00%	132,748.46	132,748.00	31.60%	41,948.37		0.00	41.51%	55,103.69		0.00	26.89%	35,695.94		0.00	94.40%	×
Rachel Nevar		Public Health Nurse II	100.00%	132,748.46	132,748.00	38.35%	50,908.86		0.00	32.64%	43,328.95		0.00	29.01%	38,510.19		0.00		_
1 Ah Vang		Health Educator	100.00%	81,277.30	81,277.00	17.30%	14,060.92		0.00	82.70%	67,216.08		0.00		0.00		0.00	82.70%	_
2 Ana Carbajal		Health Education Specialist	100.00%	61,885.00	61,885.00	17.30%	10,706.11		0.00	82.70%	51,178.90		0.00		0.00		0.00	82.70%	-
3 Nang Thao		Health Education Assistant	100.00%	56,853.94	56,854.00	17.30%	9,835.74		0.00	82.70%	47,018.26		0.00		0.00		0.00		_
4 Vacant		Health Education Assistant	100.00%	43,264.00	43,264.00	17.30%	7,484.67		0.00	82.70%	35,779.33		0.00		0.00		0.00	82.70%	
5 Vacant		Health Education Assistant	100.00%	43,264.00	43,264.00	17.30%	7,484.67		0.00	82.70%	35,779.33		0.00		0.00		0.00	82.70%	
6 Yolanda Gara	ža –	Office Assistant II	100.00%	52,791.00	52,791.00	17.30%	9,132.84		0.00	82.70%	43,658.16		0.00		0.00		0.00	82.70%	×
7 Christina Wyr	ick	Program Technician II	50.00%	62,174.00	31,087.00	17.30%	5,378.05		0.00	82.70%	25,708.95		0.00		0.00		0.00	82.70%	X
18					0.00		0.00		0.00		0.00		0.00		0.00		0.00	0.00%	
19					0.00		0.00		0.00		0.00		0.00		0.00		0.00	0.00%	
20					0.00		0.00		0.00		0.00		0.00		0.00		0.00	0.00%	
21					0.00		0.00		0.00		0.00		0.00		0.00		0.00	0.00%	
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30	Personal				0.00	1	0.00		0.00		0.00		0.00		0.00		0.00		+
31		***			0.00		0.00		0.00		0.00	_	0.00		0.00		0.00	0.00%	
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33					0.00		0.00		0.00		0.00		0.00		0.00	-	0.00		_
14					0.00		0.00		0.00		0.00		0.00		0.00		0.00	0.00%	
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37					0.00		0.00		0.00		0.00		0.00		0.00		0.00		_
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48					0.00		0.00	-	0.00		0.00	-	0.00		0.00		0.00		
19					0.00		0.00		0.00		0.00		0.00	-	0.00	<u> </u>	0.00		_
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54		1			0.00		0.00		0.00		0.00		0.00		0.00		0.00		_

Contract #/LHJ Name: CHVP SGF EBHV 25-10 County of Fresno California Home Visiting Program – SGF EBHV



California Home Visiting Program State General Fund (SGF) Evidence-Based Home Visiting (EBHV) Scope of Work

July 1, 2025- June 30, 2026

The purpose of this scope of work (SOW) is to provide guidance and outline requirements for implementing early childhood home visiting services in the California Department of Public Health/California Home Visiting Program (CDPH/CHVP) funded by California State General Funds (SGF). CHVP SGF-funded local health jurisdictions (LHJs) may implement Healthy Families America (HFA), Nurse-Family Partnership (NFP), Parents as Teachers (PAT), Family Connects International (FCI), and/or Home Instruction for Parents of Preschool Youngsters (HIPPY) evidence-based home visiting (EBHV) programs with fidelity to the model and in accordance with State requirements to achieve positive outcomes. The SOW includes the following goals:

- 1. Provide leadership and structure to implement CHVP in funded LHJs
- 2. Integrate the home visiting program into the local early childhood system
- 3. Collect, enter, and report on all required participant data
- 4. Provide extra support for staff and families served by Local MCAH home visiting programs through Special Support Activities

Note: LHJs may spend up to 20% of the SGF EBHV allocation on Special Support Activities, as outlined in Goal 4, below



July 1, 2025- June 30, 2026

Goals, Objectives, Activities, and Deliverables for July 1, 2025 - June 30, 2026

Goal	1: Provide leadership and structure to impl	ement CHVP in the LHJ	
#	Objective	Activities	Deliverables
1.1	The LHJ Maternal, Child, and Adolescent Health (MCAH) Director or designee will provide effective leadership and oversight of CHVP ¹	 (a) Provide leadership and oversight on all matters related to the development, implementation, operation, administration, and reporting for local implementation of home visiting programs following CDPH/CHVP policies and procedures (P&P) and EBHV model requirements (b) Attend quarterly CHVP Director calls (c) Participate in ongoing CAB Meetings, other local community groups, site visits, meetings, and conferences as directed by CDPH/CHVP 	Submission of: Progress Reports CAB meeting materials Staffing Reports Participation in: Quarterly CHVP Director calls Virtual and/or in-person site visits ²
1.2	The LHJ will implement home visiting services using culturally responsive practices to ensure that all interactions, interventions, and service deliveries effectively meet the diverse needs of the communities served	(a) Review the MCAH Title V Needs Assessment to determine the community's equity needs(b) Participate in opportunities designed to enhance cultural sensitivity through webinars, trainings, and/or conferences	 Submission of: Progress Reports Staffing Reports Staff training logs Collect and submit Priority Population Data (NFP only)



#	Objective	Activities	Deliverables
		(c) Provide culturally responsive services that address the identified cultural needs of families (e.g., literacy levels, disabilities, military families, grandparents, tradition, etc.)	
		(d) Provide documents in the family's preferred language, when feasible	
		(e) Provide translation services when needed	
		(f) Documents should be written in no more than an eighth grade reading level and use plain language	
		(g) Recruit and hire staff that reflect the community served and/or speak the language of program participants, when possible	
1.3	The LHJ will hire, train, and retain staff to comply with selected home visiting model requirements and CDPH/CHVP P&Ps	(a) Participate in model required trainings related to screening tools, health assessments, reflective supervision, data collection tools, and software	Submission of: • Progress Reports • Staffing Reports • Training plans



#	Objective	Activities	Deliverables
		 (b) Maintain full staffing capacity to serve families in the home visiting program and adhere to model requirements (c) All staff will sign a confidentiality agreement at the time of hire and annually thereafter (d) All staff directly serving families will complete mandated reporter training and comply with all mandated reporter requirements 	 Training logs Confirmation of a signed county confidentiality agreement for each applicable staff member
1.4	The LHJ will ensure the home visiting program reaches and maintains contracted caseload capacity (CC)	 (a) Develop and sustain relationships with appropriate agencies to obtain home visiting participant referrals (b) Develop a referral triage process for incoming home visiting participants to ensure families are connected to the program that best meets their needs 	 Submission of: Progress Reports Outreach activity logs or plan Referral triage plans outlining referral process (flow chart, narrative, etc.) Confirmation of signed CHVP Participant Consent Form for each enrolled participant



Goal 1	l: Provide leadership and structure to imp	lement CHVP in the LHJ	
#	Objective	Activities	Deliverables
		(c) Ensure newly enrolled participants provide informed consent and sign a CHVP Participant Consent Form at enrollment	Data on participant enrollment and accurate funding information entered into the data system in a timely manner
		(d) Develop and utilize a P&P on reaching out to disengaged families in accordance with CDPH/CHVP P&P 100-50	
	The LHJ will provide oversight and leadership to ensure selected home visiting model fidelity and quality assurance	(a) Implement evidence-based home visiting model requirements in accordance with the selected model(s) fidelity standards	Model developer agreement, accreditation, affiliation, and/or endorsement documentation
1.5		(b) Monitor subcontracted agencies to ensure model fidelity standards are met (if applicable)	
		(c) LHJs interested in implementing a model- approved enhancement must obtain written approval from CDPH/CHVP prior to implementation	



Goal	1: Provide leadership and structure to impl	ement CHVP in the LHJ	
#	Objective	Activities	Deliverables
1.6	The LHJ will develop and implement home visiting P&Ps and follow all applicable MCAH and CDPH/CHVP P&Ps	 (a) Develop and conduct an annual review of local P&Ps related to home visiting and update as needed (b) Conduct an annual review of, and ensure compliance with, CDPH/CHVP P&Ps (c) Conduct an annual review of, and ensure compliance with, the Local MCAH Programs Policies and Procedure. (d) Conduct an annual review of, and ensure compliance with, the MCAH Fiscal Administration P&P Manual 	 Submission of: Progress Reports Updated LHJ P&Ps related to home visiting Annual confirmation of review of local and CDPH/CHVP P&Ps, Local MCAH Program Policies and Procedures, and the MCAH Fiscal Administration Policy & Procedure Manual
1.7	The LHJ will participate in TA meetings and conduct Continuous Quality Improvement (CQI) projects and activities to support program implementation and improvement goals	 (a) Participate in voluntary CQI projects and activities in collaboration with CDPH/CHVP (b) Attend all meetings and site visits, included but not limited to: Individual TA meetings Model TA meeting 	 Submission of: Progress Reports CQI information as requested Participation in: Individual and group TA meetings CQI meetings as applicable



Goal 1: Pro	Goal 1: Provide leadership and structure to implement CHVP in the LHJ							
#	Objective	Activities	Deliverables					
		 All LHJ TA meeting Ad hoc TA meetings In-person or virtual site visit as scheduled by CDPH/CHVP 						
		(c) Use data to inform and improve program activities						

¹The MCAH Director or their designee is required to devote a minimum of 0.05 full-time equivalent (FTE) and a maximum of 0.15 FTE to CHVP oversight, fostering partnerships and collaboration within the LHJ, and directing the local CHVP community advisory board (CAB). The percentage FTE dedicated to CHVP budgets should be deducted from the local MCAH budget to ensure the LHJ does not exceed the MCAH Director FTE requirements as outlined in the *Local MCAH Programs Policies and Procedures*. If an MCAH Director cannot meet the requirements of the CHVP SOWs, they can identify a designee, as outlined in the *Local MCAH Programs Policy and Procedures*. In this situation, the designee, who may be identified as an MCAH Coordinator or other position, can act as the responsible party for CHVP, and should be designated as such in the CHVP budget justification.

² If a LHJ establishes a subcontractor to deliver home visiting services, a LHJ representative (ideally the MCAH Director) must be present during all scheduled group and individual technical assistance (TA) meetings, virtual or in-person visits, and be involved in all programmatic, data, contract, and fiscal communications with CDPH/CHVP. This requirement ensures that the LHJ maintains oversight and



July 1, 2025- June 30, 2026

direct involvement in all aspects of the contracted services, guaranteeing alignment with CDPH/CHVP standards and expectations. Additionally, no more than 10% of the allocation should be spent on administrative oversight of a subcontractor.

Goal 2	Goal 2: Integrate the home visiting program into the local early childhood system							
#	Objective	Activities	Deliverables					
2.1	The LHJ will collaborate with local early childhood system partners to ensure a continuum of services for families	 (a) Maintain a CAB that includes local early childhood system partners and meets at least quarterly to establish appropriate linkages to referral and service systems to benefit participating families (b) Meet and work with other local early childhood system and community partners to coordinate services to participating families (c) Develop and implement a transition plan for 	Progress Report including CAB meeting materials and Memoranda of Understanding (MOUs) and/or other written agreements					
		families according to model guidance and in accordance with CDPH/CHVP P&P 200-40						



2.2	The LHJ will pursue, develop, and maintain relationships with local service agencies and referral resources to facilitate participant recruitment	(a) Develop and maintain MOUs and/or other written agreements (e.g., letters of support) with community agencies and service providers	Su	bmission of: Progress Report including CAB meeting materials, MOUs, and/or other written
				agreements
			•	Outreach materials
			•	Outreach activity logs or plan

Goal	Goal 3: Collect, enter, and report on all required participant data						
#	Objective	Activities	Deliverables				
3.1	The LHJ will maintain clean and compliant data	 (a) Accurately collect and submit participant data using selected home visiting model and CDPH/CHVP-required documents, as applicable (b) Ensure all data handling complies with CDPH/CHVP's security policies, including necessary encryption, access controls, and regular data system user account audits 	Submission of timely and accurate data on participant demographics, service utilization, and performance measures according to, and with fidelity to, the selected home visiting model guidelines and CDPH/CHVP requirements				



Goal 3: Collect, enter, and report on all required participant data			
#	Objective	Activities	Deliverables
		(c) Ensure accuracy and completeness of data input into designated data systems using data quality reports and monitoring	Participation in regular TA meetings and site visits with CDPH/CHVP staff
		(d) NFP LHJs will coordinate data system requirements with the NFP National Service Office	
		(e) HFA LHJs will coordinate with the CDPH/CHVP data team to establish buildout/modification in Efforts to Outcomes (ETO) data system and will comply with all CHVP HFA Data Collection Manual requirements	
		(f) PAT LHJs will coordinate data system requirements with the PAT National Office for use of the Visit Tracker Web data system	
		(g) Collect and enter participant data into designated data systems within seven working days, or as required by the selected home visiting model	



Goal 3: Collect, enter, and report on all required participant data			
#	Objective	Activities	Deliverables
		(h) Correct data entry errors and strive to reduce missing data as directed by the CDPH/CHVP data team as needed	
		(i) HIPPY and FCI LHJs will provide and/or coordinate with data collection system owners to provide monthly enrollment and other requested reports to CDPH/CHVP as needed	



July 1, 2025- June 30, 2026

Goal 4 (if applicable): Provide extra support for staff and families served by Local MCAH home visiting programs through Special Support Activities

#	Objective	Activity	Deliverable
4.1	The LHJ will use Special Support funds for allowable activities as reflected in their budget	LHJs can spend up to 20% of their SGF EBHV allocation on approved Special Support Activities per the CHVP Special Support Activity Reference Guide Special Support Activity categories include: (a) Additional Staff Costs	Submission of: Special Support Activity Report per the CHVP Special Support Activity Reporting Guide
		(b) Training(c) Technology(d) Family Support Materials	
4.2	LHJ leadership will maintain clean and compliant Special Support Activity data, per CDPH/CHVP guidelines	(a) Collect, maintain, and report use of SGF EBHV funds for Special Support as outlined in CHVP Special Support Activity Reference Guide and the CHVP Special Support Activity Reporting Guide	 Submission of: Special Support Activity Report Additional documentation upon request



Monitoring Mechanism	Due Date			
All reports and documentation must be submitted via SharePoint, unless otherwise directed by CHVP				
Staffing Reports	 July 15, 2025 (for SFY 2024-2025) October 15, 2025 January 15, 2026 April 15, 2026 			
 Progress Report, deliverables, and updates: CAB Roster, Minutes, and Agendas MOUs or other written agreements with community agencies and service providers Outreach materials Outreach activity logs or plan Training plans and logs Policies and Procedures Referral Triage Plan Confirmation of signed CDPH/CHVP Participant Consent Forms Confirmation of signed confidentiality agreements for all direct staff Model Developer agreement, accreditation, endorsement, and/or affiliation documentation 	 July 15, 2025 (for SFY 2024-25) January 15, 2026 			
Special Support Activity Report (if applicable)	• July 15, 2025 (for SFY 2024-25)			

Contract #/LHJ Name: CHVP SGF EBHV 25-10 County of Fresno California Home Visiting Program – SGF EBHV



California Home Visiting Program State General Fund (SGF) Evidence-Based Home Visiting (EBHV) Scope of Work

July 1, 2025- June 30, 2026

Monitoring Mechanism	Due Date	
All reports and documentation must be submitted via SharePoint, unless otherwise directed by CHVP		
Priority Population Survey (NFP only)	 July 15, 2025 (for SFY 2024-25) January 15, 2026 (SFY 2025-26 to date) 	
CQI monitoring reports, data, and information	Upon Request	
Individual TA meetings	Semi-annually (TBD)	
Model TA meetings	Annually (TBD)	
All LHJ TA meeting	Annually (TBD)	
Site Visit	TBD	

NOTE: If compliance standards are not met in a timely manner, CDPH/CHVP may require the local agency to participate in an Extra Support Plan (ESP) process, and/or may temporarily withhold cash payment pending correction of the deficiency; disallowing all or part of the cost of the activity or action out of compliance; wholly or partly suspending or terminating the award; or withholding further awards.

Ge Vue	1	4/24/25
MCAH Director Name	MCAH Director Signature	Date

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Agreement Between the County of Fresno and the California Department of Public Health

Allocation Name: California Home Visiting Program – Maternal, Infant, and Early Childhood Home Visiting (MIECHV) and California Home Visiting Program – State General Funds (SGF) – Evidence-Based Home Visiting (EBHV)

Fund/Subclass: 0001/10000

Organization: 56201718, 56201750 Revenue Account #: 4380, 3530