

TRAINING AND MENTORING MODEL FOR FAMILY CONNECTS IMPLEMENTATION

INTRODUCTION

An extensive body of implementation research emphasizes that the best results for dissemination of evidence based practices are achieved when several key elements are included: 1) interactive learning sessions; 2) action periods between learning sessions for guided practice of new skills; 3) consistent use of a manual for intervention, case-based consultation, mentoring, performance assessment, and fidelity monitoring; and 4) leadership and organizational support for the new practice. In a Learning and Mentoring model (O'Donnell et al 2012; Chamberlin et al., 2012; Chamberlin et al., 2008), the cascading knowledge and mentoring from external experts to local experts has several benefits for programs adopting the evidence-based practice. For Family Connects, advantages of this dissemination model include:

- Preserves best practices as the Family Connects model reaches larger audiences;
- Limits the need for external experts to conduct larger-scale local training sessions, systematically replacing external experts with local leadership;
- Promotes local ownership and expertise toward sustainability;
- Provides a monitoring structure for new programs to adopt standards to be certified as a Family Connects program; and
- Continues support for ongoing certification as a Family Connects Program.

In support of the **AGENCY'S** implementation of the Family Connects model, the following steps and key activities represent the combined efforts of the **CONTRACTOR** and **AGENCY**. The final *Site Implementation Plan* produced through the first phase of the project will delineate the responsibilities of each party to this agreement and will become part of this agreement upon completion.

TRAINING PHASES

PHASE 1: SITE PREPARATION & IMPLEMENTATION PLAN DEVELOPMENT

- Contract finalization including the approved scope of work and executed Business Associate Agreement
- Identification of the Site Implementation Team that will provide overall program management for all components of the Family Connects model (nurse visiting, community alignment, and data collection and monitoring)
- Completion of site readiness assessment relative to the Critical Components of the Family Connects Model:
 - Assessment of current home visiting activities supporting newborns and their families in the service population
 - Assessment of current community connections and responses to needs of infants and families; specifically role of and community connection to local child welfare agencies
 - Assessment of current data collection and monitoring across and among local preventative system of care agencies
- Development and approval of an individualized *Site Implementation Plan*

PHASE 2: PROGRAM INSTALLATION

- Consultation with Family Connects National Service Office (FC NSO) relative to all critical components of the Family Connects model as well as the overall public health and community change approach inherent within the model.
 - Determination of key community alignment processes and procedures (including development and integration of local area resources into the *Family Support Matrix /Agency Finder*) with supportive guidance from the FC NSO
 - Determination of all data collection and reporting processes in support of mandated program reporting for identified key performance indicators relative to program implementation as well as submission of de-identified client-level data for program monitoring and evaluation
 - Determination of final program staffing plan and hiring
- Pre-service staff training/education regarding areas of possible family difficulty including infant feeding, maternal mental health, maternal mental health, domestic violence, etc.
- Pre-service staff training regarding key areas of competence including safety in home visiting, assessment and mitigation of vicarious trauma, and reflective supervision practices employed in the Family Connects model.
- Site Implementation Team Training (to be held in Durham, NC)
 - Review of relevant published information regarding dissemination and implementation of evidence-based models
 - Review of published information regarding implementation and evaluation of the Family Connects model
 - Nurse Home Visit (NHV) training including model adherence, and quality assurance processes as well as opportunity to observe Durham Connects home visits and program operations
 - Family Support Matrix (FSM) training including use of the matrix within the FC high inference interview methodology and program operations to assure inter-rater reliability among NHV staff
 - Post Visit Call (PVC) training including use of FCM data, documentation for reporting, and quality assurance practices and procedures
 - Family Connects Database (FCD) training / report requirement review for program operations, program documentation, and reporting procedures
 - Community Alignment training and supportive guidance regarding best practices in collaboration and data sharing as implemented in other similar implementation sites along with development of site-specific processes and procedures

PHASE 3: INITIAL IMPLEMENTATION

- Initiation of FC home visits with supportive guidance from FC NSO staff and consultants
- Weekly consultation with NSO Nurse Home Visit Trainers regarding model adherence and quality assurance components for all home visits conducted during this Phase
- Bi-weekly consultation with NSO Data Monitoring and Evaluation staff regarding data collection processes and outputs/key performance indicators
- Bi-weekly consultation with NSO Community Alignment staff regarding development and implementation of Agency Finder and Community Advisory Board
- Site-visit by NSO staff including: observation and assessment/documentation of progress in implementing key program components (e.g., nurse visits, post visit calls, quality assurance processes, data collection, data reporting, and community alignment process)
- Site visit report submitted with updated *Site Implementation Plan* as well as recommendations for ongoing operations and/or remediation steps necessary for full program operation

PHASE 4: CONTINUED CONSULTATION & PREPARATION FOR FINAL PROGRAM CERTIFICATION:

- Bi-weekly or monthly consultation with NSO Nurse Home Visit Trainers regarding scheduling, adherence, and quality assurance components
- Model-specific training of additional Nurse Home Visitors and/or program staff with support and agreement of NSO
- Monthly consultation with NSO Data Monitoring and Evaluation staff regarding data collection processes and outputs/key performance indicators
- Monthly consultation with NSO Community Alignment staff regarding development and implementation of Agency Finder and Community Advisory Board
- Monthly submission and review of key performance indicators
- Quarterly submission of de-identified data to the NSO for review and assessment relative to critical program components.

PHASE 5: FINAL PROGRAM CERTIFICATION/FULL IMPLEMENTATION:

- Site-visit by NSO staff including: observation and assessment/documentation of progress in implementing key program components (e.g., nurse visits, post visit calls, quality assurance processes, data collection, data reporting, and community alignment process)
- Site visit report submitted with recommendations for Full Certification and/or remediation steps necessary for full certification

EXAMPLE



ATTACHMENT B

Training Costs and Training Schedule
 Family Connects Implementation
 (<3000 births annually)

Milestone	Cost
1. Site Preparation [9/1/16 – 12/31/16] <ul style="list-style-type: none"> Contract agreement & BAA execution Site readiness assessment Individualized site implementation plan 	\$5,000.00
2. Program Installation [1/1/17 – 3/31/17] <ul style="list-style-type: none"> Consultation with FC National Service Office Community Alignment Plan Development Database set-up and report testing Initial FC Model Training (Durham, NC) 	\$6,150.00
3. Initial Implementation [4/1/17 – 6/1/17] <ul style="list-style-type: none"> Consultation with FC National Service Office Initial fidelity visit (Illinois) FC Model Training (Illinois) 	\$11,150.00
4. Certification Preparation [6/1/17-3/1/18] <ul style="list-style-type: none"> Consultation with FC National Service Office Monitored quality assurance process and output Monitored data collection and reporting 	\$24,000.00
5. On-Site Review for Program Certification [7/17] <ul style="list-style-type: none"> Site visit and observation of all critical program components Final report and official certification letter 	\$3,700.00
PROJECT TOTAL	\$50,000.00

Total costs for the training and implementation as outlined in ATTACHMENT A: SCOPE OF WORK are outlined in the table to the left. Based on the delivery of each program milestone/component, CONTRACTOR will invoice per the following schedule:

Invoice Date: March 31, 2017

Invoice Amount: \$11,150.00

Deliverables/Activities: Site readiness assessment, individualized implementation plan, community alignment plan, database set-up and testing, and Model Training in Durham, NC.

Invoice Date: June 1, 2017

Invoice Amount: \$11,150.00

Activities/Materials: Initial fidelity visit, program consultation, and development of on-site training plan for new staff,

Invoice Date(s): August 1, 2017, October 1, 2017, and December 1, 2017

Invoice Amount(s): \$8,000.00 per invoice

Activities/Materials: Program consultation, monitored quality assurance, monitored data collection and reporting.

Invoice Date: March 31, 2018

Invoice Amount(s): \$3,700.00

Activities/Materials: Program consultation, monitored quality assurance, monitored data collection, final site visit for certification, final report, and certification letter.