

100-60 MAXIMUM CASELOAD CAPACITY**PURPOSE**

The purpose of this policy is to provide guidance to the California Home Visiting (CHVP) definition for Maximum Caseload Capacity (MCC) that may affect staffing, budgets and caseload requirements for CHVP sites. The MCC will be established during negotiations with assigned Program Consultant, Contract Manager and Research Scientist.

POLICY

In 2016, Health Resources & Services Administration (HRSA) created a standardized definition for caseload to capture the reach of Maternal, Infant and Early Childhood Home Visiting (MIECHV) funds nationwide. Accordingly, all CHVP participants who are served by a home visitor for whom at least 25% of his/her personnel costs are paid for with (MIECHV) funding must be reported to Health Resources and Services Administration (HRSA).

PROCEDURE

I. All CHVP sites are required to: (1) determine MCC; and (2) ensure proper data collection methods.

A. Each site must determine their MCC by choosing one of the Caseload Options outlined below.

1. CASELOAD OPTION #1:

All home visitors' personnel costs are 100% MIECHV funded. Healthy Families America (HFA) sites are expected to carry a caseload of 16 participants per 1.0 FTE home visitor and Nurse Family Partnership (NFP) sites 25 participants per 1.0 FTE home visitor.

	# of Home Visitors/FTE	% MIECHV Funded	Participants per Home Visitor	Maximum Caseload Capacity
Example #1 NFP	4 HV@ 1.0 FTE	100	25	100
Example #2 HFA	5 HV@ 1.0 FTE	80	16	80
Example #3 NFP	3 HV@ 1.0 FTE 2 HV@ 0.5 FTE	100 100	25 12 or 13	100

2. CASELOAD OPTION #2:

MIECHV funds are braided with other funds across home visitors, with all home visitors' personnel costs paid with a minimum of 25% MIECHV funding. Per the HRSA definition, the site will be required to report all of the home visitor's caseload to CHVP. The MCC will be greater than the caseload expected if the site chose Option #1. If Option #2 is selected, the MCC will be discussed during a scheduled contract negotiation call with the site's assigned Program Consultant, Contract Manager and Research Scientist.

	# of Home Visitors/FTE	% MIECHV Funded	Participants per Home Visitor	Maximum Caseload Capacity
Example #1 NFP or HFA	16 HV@ 1.0 FTE	25	To be negotiated	To be negotiated
Example #2 NFP or HFA	1 HV@1.0 FTE 1 HV@1.0 FTE 1 HV@1.0 FTE 1 HV@1.0 FTE 1 HV@1.0 FTE 1 HV@1.0 FTE	80 80 80 60 60 40	To be negotiated	To be negotiated

When Option #2 is chosen, the site must indicate the following:

- Total number of home visitors
- Total FTE for each home visitor
- Expected number of participants served by each home visitor
- Percent of each HV's salary funded by MIECHV
- Total MIECHV funded FTE among all home visitors

B. Ensure Proper Data Collection Methods (All Sites)

All participants served as part of the MCC must complete the CHVP Consent Form.

NFP sites must complete the Client Funding Source Form for each participant by selecting MIECHV funding to be included in the federal reports to HRSA.

REFERENCES

- 2017 Formula Work Plan and Budget Update (WPBU) Section VI
- OMB No. 0906-0016 Form 4 – Section A.1