



Erica Pan, MD, MPH  
Director and State Public Health Officer

Gavin Newsom  
Governor

October 24, 2025

Sandy Tadeo  
MCAH Director  
County of Mendocino  
1120 South Dora Street  
Ukiah, CA 95482

Dear Sandy:

**APPROVAL OF STATE FISCAL YEAR (SFY) 2025-26 AGREEMENT FUNDING APPLICATION (AFA) FOR AGREEMENT(S):**

CHVP SGF EBHV 25-23  
CHVP SGF INN 25-23

The California Department of Public Health, Maternal, Child and Adolescent Health (CDPH/MCAH) Division approves your Agency's AFA for administration of MCAH related programs.

To carry out the program(s) outlined in your approved SOW(s) and Budget(s), during the period of July 1, 2025 through June 30, 2026, the CDPH/MCAH Division will reimburse expenditures up to the following amounts:

<b><u>California Home Visiting Program FY25-26</u></b>	
SGF EBHV.....	\$550,882.90
SGF INN 1.0.....	\$137,893.29

The availability of SGF funds is based upon funds appropriated in each respective SFY (2025-26) Budget Act. The availability of Federal Financial Participation (FFP), also known as Title XIX (TXIX), is based upon the appropriation of funds from the Department of Health Care Services that administers the FFP Medicaid Program.

Reimbursement of invoices is subject to compliance with all federal and state requirements pertaining to the CDPH/MCAH related programs and adherence to all applicable regulations, policies and procedures. Your Agency agrees to invoice actual and documented expenditures and to follow all the conditions of compliance stated in the current CDPH/MCAH Program and Fiscal Policies and Procedures manuals, including the ability to substantiate all funds claimed.



For agencies claiming Title XIX funds, you also agree to maintain secondary documentation that clearly substantiates time study activities as being non-program related, unmatched, non-enhanced or enhanced. You also agree to use either:

1. The web-posted CDPH/MCAH, BIH Base Medi-Cal Factor (MCF), and/or
2. A Variable Base MCF for specific staff who serve a unique client population, and who verify and document 100% of their Medi-Cal enrolled and non-Medi-Cal enrolled clients during each time study period (MCAH Program only).

**Caseload Requirements:** Your LHJ is expected to reach and maintain the following caseload capacities (indicated below by model and funding source). If you are starting up or expanding a program or model, you have 18 months from the date of your initial AFA Approval notification to reach your contracted caseload capacity.

Funding Source	Model Type	Contracted Caseload Capacity
SGF EBHV	HFA	19

Please ensure that all necessary individuals within your Agency are notified of this approval and that the approved AFA documents are carefully reviewed. This approval letter constitutes a binding agreement. If any of the information contained in your approved SOW and Budget is incorrect or different from that negotiated, please contact your CHVP contract liaison, Christina Jenkins by e-mail at [Christina.Jenkins@cdph.ca.gov](mailto:Christina.Jenkins@cdph.ca.gov) within 14 calendar days from the date of this letter. Non-response constitutes acceptance of your approved AFA documents.

Sincerely,



Angelica Jimenez-Bean  
Section Chief, Contract Management and Allocations Process  
Maternal, Child and Adolescent Health Division  
Center for Family Health  
California Department of Public Health

cc: Sofia Vargas  
County of Mendocino – Fiscal Contact

Christina Jenkins  
CHVP Contract Liaison

Guadalupe Morimune  
CHVP Program Consultant

Anina Sanchez  
CHVP Program Consultant

**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 (HIPPPY) 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

**California Home Visiting Program  
 State General Fund (SGF) Evidence-Based Home Visiting (EBHV)  
 Scope of Work  
 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 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 <sup>1</sup>	(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	<b>Submission of:</b> <ul style="list-style-type: none"> <li>Progress Reports</li> <li>CAB meeting materials</li> <li>Staffing Reports</li> </ul> <b>Participation in:</b> <ul style="list-style-type: none"> <li>Quarterly CHVP Director calls</li> <li>Virtual and/or in-person site visits <sup>2</sup></li> </ul>
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	<b>Submission of:</b> <ul style="list-style-type: none"> <li>Progress Reports</li> <li>Staffing Reports</li> <li>Staff training logs</li> <li>Collect and submit Priority Population Data (NFP only)</li> </ul>

**California Home Visiting Program**  
**State General Fund (SGF) Evidence-Based Home Visiting (EBHV)**  
**Scope of Work**  
 July 1, 2025- June 30, 2026

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.)  (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	<b>Submission of:</b> <ul style="list-style-type: none"> <li>• Progress Reports</li> <li>• Staffing Reports</li> <li>• Training plans</li> </ul>

**California Home Visiting Program**  
**State General Fund (SGF) Evidence-Based Home Visiting (EBHV)**  
**Scope of Work**  
 July 1, 2025- June 30, 2026

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#	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	<ul style="list-style-type: none"> <li>• Training logs</li> <li>• Confirmation of a signed county confidentiality agreement for each applicable staff member</li> </ul>
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	<b>Submission of:</b> <ul style="list-style-type: none"> <li>• Progress Reports</li> <li>• Outreach activity logs or plan</li> <li>• Referral triage plans outlining referral process (flow chart, narrative, etc.)</li> <li>• Confirmation of signed <i>CHVP Participant Consent Form</i> for each enrolled participant</li> </ul>

**California Home Visiting Program**  
**State General Fund (SGF) Evidence-Based Home Visiting (EBHV)**  
**Scope of Work**  
 July 1, 2025- June 30, 2026

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 <i>CHVP Participant Consent Form</i> at enrollment  (d) Develop and utilize a P&P on reaching out to disengaged families in accordance with CDPH/CHVP P&P 100-50	<ul style="list-style-type: none"> <li>Data on participant enrollment and accurate funding information entered into the data system in a timely manner</li> </ul>
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 model-approved enhancement must obtain written approval from CDPH/CHVP prior to implementation	<b>Submission of:</b> <ul style="list-style-type: none"> <li>Model developer agreement, accreditation, affiliation, and/or endorsement documentation</li> </ul>

**California Home Visiting Program**  
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**Scope of Work**  
 July 1, 2025- June 30, 2026

Goal 1: Provide leadership and structure to implement 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 <i>Local MCAH Programs Policies and Procedure</i> .  (d) Conduct an annual review of, and ensure compliance with, the <i>MCAH Fiscal Administration P&amp;P Manual</i>	<b>Submission of:</b> <ul style="list-style-type: none"> <li>Progress Reports</li> <li>Updated LHJ P&amp;Ps related to home visiting</li> <li>Annual confirmation of review of local and CDPH/CHVP P&amp;Ps, <i>Local MCAH Program Policies and Procedures</i>, and the <i>MCAH Fiscal Administration Policy &amp; Procedure Manual</i></li> </ul>
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: <ul style="list-style-type: none"> <li>Individual TA meetings</li> <li>Model TA meeting</li> </ul>	<b>Submission of:</b> <ul style="list-style-type: none"> <li>Progress Reports</li> <li>CQI information as requested</li> </ul> <b>Participation in:</b> <ul style="list-style-type: none"> <li>Individual and group TA meetings</li> <li>CQI meetings as applicable</li> </ul>

**California Home Visiting Program  
 State General Fund (SGF) Evidence-Based Home Visiting (EBHV)  
 Scope of Work  
 July 1, 2025- June 30, 2026**

Goal 1: Provide leadership and structure to implement CHVP in the LHJ			
#	Objective	Activities	Deliverables
		<ul style="list-style-type: none"> <li>• All LHJ TA meeting</li> <li>• Ad hoc TA meetings</li> <li>• In-person or virtual site visit as scheduled by CDPH/CHVP</li> </ul> <p>(c) Use data to inform and improve program activities</p>	

<sup>1</sup> The 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.

<sup>2</sup> 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

**California Home Visiting Program  
 State General Fund (SGF) Evidence-Based Home Visiting (EBHV)  
 Scope of Work  
 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: 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 families according to model guidance and in accordance with CDPH/CHVP P&P 200-40	<b>Submission of:</b> <ul style="list-style-type: none"> <li>Progress Report including CAB meeting materials and Memoranda of Understanding (MOUs) and/or other written agreements</li> </ul>

**California Home Visiting Program**  
**State General Fund (SGF) Evidence-Based Home Visiting (EBHV)**  
**Scope of Work**  
 July 1, 2025- June 30, 2026

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	<b>Submission of:</b> <ul style="list-style-type: none"> <li>• Progress Report including CAB meeting materials, MOUs, and/or other written agreements</li> <li>• Outreach materials</li> <li>• Outreach activity logs or plan</li> </ul>
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**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	<ul style="list-style-type: none"> <li>• 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</li> </ul>

**California Home Visiting Program  
 State General Fund (SGF) Evidence-Based Home Visiting (EBHV)  
 Scope of Work  
 July 1, 2025- June 30, 2026**

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  (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 <i>CHVP HFA Data Collection Manual</i> 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	<ul style="list-style-type: none"> <li>Participation in regular TA meetings and site visits with CDPH/CHVP staff</li> </ul>

**California Home Visiting Program  
 State General Fund (SGF) Evidence-Based Home Visiting (EBHV)  
 Scope of Work  
 July 1, 2025- June 30, 2026**

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	

**California Home Visiting Program**  
**State General Fund (SGF) Evidence-Based Home Visiting (EBHV)**  
**Scope of Work**  
 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 <i>CHVP Special Support Activity Reference Guide</i>  Special Support Activity categories include: (a) Additional Staff Costs (b) Training (c) Technology (d) Family Support Materials	<b>Submission of:</b> <i>Special Support Activity Report</i> per the <i>CHVP Special Support Activity Reporting Guide</i>
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 <i>CHVP Special Support Activity Reference Guide</i> and the <i>CHVP Special Support Activity Reporting Guide</i>	<b>Submission of:</b> <ul style="list-style-type: none"> <li>• <i>Special Support Activity Report</i></li> <li>• Additional documentation upon request</li> </ul>

**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
<b>All reports and documentation must be submitted via SharePoint, unless otherwise directed by CHVP</b>	
Staffing Reports	<ul style="list-style-type: none"> <li>• July 15, 2025 (for SFY 2024-2025)</li> <li>• October 15, 2025</li> <li>• January 15, 2026</li> <li>• April 15, 2026</li> </ul>
Progress Report, deliverables, and updates: <ul style="list-style-type: none"> <li>• CAB Roster, Minutes, and Agendas</li> <li>• MOUs or other written agreements with community agencies and service providers</li> <li>• Outreach materials</li> <li>• Outreach activity logs or plan</li> <li>• Training plans and logs</li> <li>• Policies and Procedures</li> <li>• Referral Triage Plan</li> <li>• Confirmation of signed CDPH/CHVP Participant Consent Forms</li> <li>• Confirmation of signed confidentiality agreements for all direct staff</li> <li>• Model Developer agreement, accreditation, endorsement, and/or affiliation documentation</li> </ul>	<ul style="list-style-type: none"> <li>• July 15, 2025 (for SFY 2024-25)</li> <li>• January 15, 2026</li> </ul>
Special Support Activity Report (if applicable)	<ul style="list-style-type: none"> <li>• July 15, 2025 (for SFY 2024-25)</li> </ul>



**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
<b>All reports and documentation must be submitted via SharePoint, unless otherwise directed by CHVP</b>	
Priority Population Survey (NFP only)	<ul style="list-style-type: none"> <li>July 15, 2025 (for SFY 2024-25)</li> <li>January 15, 2026 (SFY 2025-26 to date)</li> </ul>
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.

Sandy Tadeo

MCAH Director Name

MCAH Director Signature

9/4/2025

Date

## California Home Visiting Program State General Fund (SGF) Innovation 1.0 Project Scope of Work Template July 1, 2025- June 30, 2026

The purpose of this scope of work (SOW) is to identify goals, objectives, activities, timelines, and deliverables for State Fiscal Year (SFY) 2025-26 associated with the implementation of the California Home Visiting Program (CHVP) State General Fund (SGF) Innovation 1.0 Project. The project period for the CHVP SGF Innovation 1.0 Project is July 1, 2020 – June 30, 2026. The purpose of this funding is to support implementation of home visiting as a primary intervention strategy for families from pregnancy through kindergarten entry with an evidence-informed model or an evidence-based model with an innovative practice to meet a local need. Each project incorporates an evaluation component, to support learning and sharing of best practices, as well as to assess the potential for continued or broader use. The aim of this funding is to provide home visiting services to populations that may benefit from an alternative approach to maximize service utilization and promote positive outcomes and family success.

CHVP SGF Innovation 1.0 project funding ends June 30, 2026. All objectives, activities, and deliverables in this SOW are based on that timeline and may differ depending on LHJ project plans for sustaining other funding thereafter or closing project implementation at that time.

### **PROJECT NAME:**

#### **Innovation Project Description:**

Through its MCAH Program, Mendocino County Public Health (MCPH) Division will continue to implement the evidence-based Healthy Families America (HFA) model with incorporation of a Promotores de Salud component that includes outreach and implementation strategies designed to better recruit, reach, engage, serve, and retain rural Latina women with the goals of supporting positive health, development, and well-being outcomes for pregnant and parenting women, families, and infants in the rural Latino population of Mendocino County. Additionally MCPH will create guidance and recommendations identifying the successes of the Promotores innovation.

#### **Service Population:**

Pregnant and parenting women, families, and infants within the Latino population of rural Mendocino County.



**California Home Visiting Program  
 State General Fund (SGF) Innovation 1.0 Project  
 Scope of Work Template  
 July 1, 2025- June 30, 2026**

**Reach:**

By the end of the grant period, MCPH will maintain a bilingual team of at least three Spanish speaking bilingual/bicultural Home Visitors and a Supervisor which will increase MCPH’s potential home visiting engagement and retention among this population through intensive outreach. MCPH’s aims to maintain a caseload of 10 rural Latino families at one time through this innovation. Accounting for program completion, dropouts, and new entries, the program with the proposed innovation will serve an unduplicated total of at least 20 families over one year. The bilingual/bicultural Home Visitors and Supervisor will be trained in the HFA evidence base model and assigned to work with rural Latino women and their families.

**Setting:**

MCPH anticipates that most home visits will be conducted in the traditional manner by visiting the home of the participating family. However, MCPH will also offer alternative means for visiting, including virtual visits to increase access and participation by families in geographically isolated communities, as well as meeting in community locations.

<b>Goal #1: Implement and maintain an innovative home visiting project</b>					
<b>Local health jurisdictions (LHJs) will develop SMART activities, identify responsible staff, and determine project deliverables for SFY 2025-26 and adhere to those identified by CDPH/CHVP</b>					
<b>#</b>	<b>Objective</b>	<b>Intervention Activities to Meet Objectives</b> Must be specific, measurable, achievable, relevant, and time-bound (SMART)	<b>Responsible Staff</b>	<b>Deliverables</b>	<b>CHVP-Required Deliverables</b>
<b>1.1</b>	Hire, train, equip, and retain staff for the project	a) Maintain 3 part-time bilingual/bicultural Spanish speaking home visitors and	a) Supervisor, MCAH Director	a) Proof of staff employment, training log	Submission of Final Report



**California Home Visiting Program**  
**State General Fund (SGF) Innovation 1.0 Project**  
**Scope of Work Template**  
 July 1, 2025- June 30, 2026

<b>Goal #1: Implement and maintain an innovative home visiting project</b>					
<b>Local health jurisdictions (LHJs) will develop SMART activities, identify responsible staff, and determine project deliverables for SFY 2025-26 and adhere to those identified by CDPH/CHVP</b>					
<b>#</b>	<b>Objective</b>	<b>Intervention Activities to Meet Objectives</b> Must be specific, measurable, achievable, relevant, and time-bound (SMART)	<b>Responsible Staff</b>	<b>Deliverables</b>	<b>CHVP-Required Deliverables</b>
		ensure staff receive ongoing training as needed b) Staff will receive at least one training related to unique cultural considerations of the service population or topics related to developing skills to deliver culturally considerate services c) Ongoing adherence to HFA caseload guidelines for home visitors and supervisor	b) MCAH Director, Supervisor, Home Visitor  c) MCAH Director, Supervisor	b) Training logs  c) Caseload reports	
<b>1.2</b>	Perform ongoing supervision and coaching of staff	a) On an ongoing basis weekly supervision will be provided for each home visitor to include use of reflective	a) MCAH Director, Supervisor	a) Supervision records	Submission of Final Report



**California Home Visiting Program**  
**State General Fund (SGF) Innovation 1.0 Project**  
**Scope of Work Template**  
 July 1, 2025- June 30, 2026

<b>Goal #1: Implement and maintain an innovative home visiting project</b>					
<b>Local health jurisdictions (LHJs) will develop SMART activities, identify responsible staff, and determine project deliverables for SFY 2025-26 and adhere to those identified by CDPH/CHVP</b>					
<b>#</b>	<b>Objective</b>	<b>Intervention Activities to Meet Objectives</b> Must be specific, measurable, achievable, relevant, and time-bound (SMART)	<b>Responsible Staff</b>	<b>Deliverables</b>	<b>CHVP-Required Deliverables</b>
		strategies per HFA best practice standards and are reflective of cultural considerations of the target population b) On an ongoing basis assure that all HFA required trainings are completed within guidelines, are responsive to the target population, and identify additional training/coaching needs for each staff person. c) Ongoing quarterly project teams meetings will be facilitated in addition to	b) MCAH Director, Supervisor  c) MCAH Director, Supervisor	b) Training logs  c) Agendas and meeting minutes	



**California Home Visiting Program**  
**State General Fund (SGF) Innovation 1.0 Project**  
**Scope of Work Template**  
 July 1, 2025- June 30, 2026

<b>Goal #1: Implement and maintain an innovative home visiting project</b>					
<b>Local health jurisdictions (LHJs) will develop SMART activities, identify responsible staff, and determine project deliverables for SFY 2025-26 and adhere to those identified by CDPH/CHVP</b>					
<b>#</b>	<b>Objective</b>	<b>Intervention Activities to Meet Objectives</b> Must be specific, measurable, achievable, relevant, and time-bound (SMART)	<b>Responsible Staff</b>	<b>Deliverables</b>	<b>CHVP-Required Deliverables</b>
		collaborative weekly meetings with the other home visiting program staff.			
<b>1.3</b>	Engage with other government agencies and/or community organizations to coordinate and collaborate on the project to support home visiting infrastructure and the service population	a) On an ongoing basis project staff will participate in meetings and other activities with the Perinatal Plus Coalition to share project updates and insights specific to the target population. b) Program staff will attend at least 4 outreach events per year that are hosted by relevant organizations serving the target	a) MCAH Director, Supervisor, Home Visitor  b) Home Visitor	a) Agendas and meeting minutes  b) Outreach log	Submission of Final Report



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 State General Fund (SGF) Innovation 1.0 Project  
 Scope of Work Template  
 July 1, 2025- June 30, 2026**

<b>Goal #1: Implement and maintain an innovative home visiting project</b>					
<b>Local health jurisdictions (LHJs) will develop SMART activities, identify responsible staff, and determine project deliverables for SFY 2025-26 and adhere to those identified by CDPH/CHVP</b>					
<b>#</b>	<b>Objective</b>	<b>Intervention Activities to Meet Objectives</b> Must be specific, measurable, achievable, relevant, and time-bound (SMART)	<b>Responsible Staff</b>	<b>Deliverables</b>	<b>CHVP-Required Deliverables</b>
		population to network with agencies and community organizations to gain referrals and community resources			
<b>1.4</b>	Recruit, enroll, and/or retain project participants if project will continue after June 30, 2026	a) On an ongoing basis, referrals will be collected, tracked, and home visiting services offered throughout Mendocino County. b) Program will monitor monthly caseload c) Annual family satisfaction surveys will be completed per HFA best practice	a) MCAH Director, Supervisor, Home Visitor b) MCAH Director, Supervisor c) MCAH Director,	a) Referral tracking report  b) Caseload report  c) Summary of family satisfaction survey and key findings	Submission of Monthly Families Served Tracking Chart with Final Report



**California Home Visiting Program**  
**State General Fund (SGF) Innovation 1.0 Project**  
**Scope of Work Template**  
 July 1, 2025- June 30, 2026

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		standards, including the review of questions to ensure clarity and include family feedback about program effectiveness d) Within 90 days of family satisfaction survey completion results will be analyzed and results reported, including strategies developed to address issues impacting participant retention e) On a monthly basis, the program will monitor home visit completion rate to	Supervisor, Home Visitor  d) MCAH Director, Supervisor, Home Visitor  e) MCAH Director, Supervisor	d) Documentation of strategies to address family retention/dissatisfaction issues identified  e) Database report  f) Sample materials	



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		ensure consistent participant engagement and address any barriers to visits. f) Program staff will ensure all internal promotional and outreach materials are developed and updated in Spanish	f) MCAH Director, Supervisor, Home Visitor		
1.5	Develop a sustainability plan for project transition when CHVP SGF Innovation 1.0 project funding ends June 30, 2026	a) Identify at least two braided funding sources by June 2026 to sustain core components of the project post-grant. b) Train all non-bicultural staff using the project’s unique	a) MCAH Director, Supervisor  b) MCAH Director, Supervisor,	a) Budget projects/drafts  b) Training logs	Submission of Final Report



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		cultural training opportunities and lessons learned c) Provide culturally relevant Spanish-language outreach materials across all home visiting subprograms d) Retain trained staff in other home visiting programs to share insights and focus on culturally responsive engagement and lead best practice sessions	Home Visitor c) MCAH Director, Supervisor, Home visitor d) MCAH Director, Supervisor, Home Visitor	c) Sample materials  d) Meeting minutes	
<b>1.6</b>	Ensure model fidelity (Option 2 LHJs only)	a) Implement and update policies and procedures that are in alignment with the	a) MCAH Director, Supervisor,	a) Healthy Families Mendocino	Submission of Final Report



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		HFA Best Practice Standards, including feedback from program staff and participants about best practices learned in serving the target population. b) Confer with National HFA training and technical assistance consultant no less than quarterly to assure local practices are in fidelity with the HFA model. c) Develop and implement a Quality Assurance Plan per HFA Best Practice Standards	Home Visitor  b) MCAH Director, Supervisor  c) MCAH Director, Supervisor	County Policies & Procedures  b) Meeting notes  c) Quality Assurance Plan	



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<b>1.7</b>	Update policies and procedures developed for implementation of innovation project	a) On an ongoing basis review and revise policies and procedures using implementation insights and HFA best practice standards, incorporating CHVP requirements and lessons learned from serving the target population. b) Present and discuss updated policies quarterly in team meetings to ensure staff input and alignment with the evolving needs and experiences of the target population.	a) MCAH Director, Supervisor  b) MCAH Director, Supervisor	a) Healthy Families Mendocino County Policies & Procedures  b) Agendas and minutes	Submission of project policies and procedures with Final Report



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<b>1.8</b>	Adhere to CHVP Policies and Procedures, <i>Local MCAH Programs Policies and Procedures</i> , and the <i>MCAH Fiscal Administration Policy &amp; Procedure Manual</i>	a) On an ongoing basis utilize HFA best practice standards to inform and develop policies and procedures required for project implementation with inclusion of any additional CHVP requirements.	a) MCAH Director, Supervisor, Home Visitor	a) Healthy Families Mendocino County Policies & Procedures	Submission of Final Report
<b>1.9</b>	Participate in all required CHVP meetings and trainings	a) Project staff will attend all required trainings, including ongoing trainings and meetings as scheduled by CHVP	a) MCAH Director, Supervisor, Home Visitor	a) Meeting minutes/training log	Record of attendance for all required CHVP meetings and trainings



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<b>1.10</b>	Present project progress and findings to MCAH, CHVP, and other local, state, and national stakeholders	a) Deliver required reports and presentations to CHVP within required timelines. b) Provide quarterly program progress updates to the Perinatal Plus Coalition.	a) MCAH Director, Supervisor  b) MCAH Director, Supervisor, Home Visitor	a) Written reports and presentation  b) Agendas and minutes	Annual presentation as scheduled by CDPH/CHVP
<b>1.11</b>	Develop an Innovation Project Implementation Manual that provides guidance to other LHJs or entities interested in implementing the project.	a) Hold one staff review session by January 2026 to gather key feedback on the draft manual. b) Collect feedback from the Perinatal Plus Coalition via a	a) MCAH Director, Supervisor	a) Meeting minutes	Submission of Innovation Project Implementation Manual following CDPH/CHVP guidance with the submission



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	This may include budget guidance, lessons learned, tools and materials, staffing, training, logic model, policies and procedures, evaluation findings, and any other relevant information and resources	survey or brief meeting by February 2026. c) Incorporate top-priority edits and finalize the manual by April 2026. d) Ensure workflows in the manual reflect current practices and are aligned by the final draft deadline.	b) MCAH Director, Supervisor  c) MCAH Director, Supervisor  d) MCAH Director, Supervisor	b) Survey/meeting minutes  c) Updated implementation manual document  d) Updated Implementation Manual Document	of the Final Report or sooner
<b>1.12</b>	Participate in conferences, presentations, or other activities to support learning and sharing of	a) Attend required conferences, presentations, and other activities to support learning	a) MCAH Director, Supervisor	a) Written reports and presentation	Submission of presentation materials/documents



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	project lessons and findings (optional/as appropriate)	and sharing of project lessons as required by CHVP			to CDPH/CHVP in Final Report

<b>Goal #2: Evaluate an innovative home visiting program (Option 1) or evaluate the innovative add-on component or innovative approach to an evidence-based home visiting program (Option 2)</b>			
<b>Local health jurisdictions (LHJs) will adhere to the goals, objectives, activities, and deliverables identified</b>			
<b>#</b>	<b>Short and/or Intermediate Objectives</b>	<b>Intervention Activities to Meet Objectives</b>	<b>Deliverables</b>
<b>2.1</b>	Plan the continued evaluation of your innovative practice, building on guidance from the previous funding cycle and as	<b>2.1(a)</b> Complete an evaluation study plan by updating Table 1	<b>2.1(a)</b> Submit an updated Table 1 following CDPH/CHVP guidance, due with the 2025-26 Final Report <b>2.1(b)</b> Keep IRB approvals and renewals on file and available if requested by CDPH/CHVP



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 State General Fund (SGF) Innovation 1.0 Project  
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 July 1, 2025- June 30, 2026**

**Goal #2: Evaluate an innovative home visiting program (Option 1) or evaluate the innovative add-on component or innovative approach to an evidence-based home visiting program (Option 2)**

Local health jurisdictions (LHJs) will adhere to the goals, objectives, activities, and deliverables identified

#	Short and/or Intermediate Objectives	Intervention Activities to Meet Objectives	Deliverables
	appropriate for your process-only or process and outcomes evaluation	<b>2.1(b)</b> Seek and secure any needed exemptions, approvals, or renewals from Institutional Review Board (IRB) for the Protection of Human Subjects	
<b>2.2</b>	Conduct the planned evaluation study of the home visiting innovation	<b>2.2</b> Complete a final evaluation report on progress made on the implementation of the evaluation study	<b>2.2</b> Final evaluation report as per CHVP guidance to be submitted with the Final Report
<b>2.3</b>	Conduct the analyses and synthesize the findings from the evaluation study	<b>2.3(a)</b> Complete a final evaluation report	<b>2.3(a)</b> Final evaluation report as per CDPH/CHVP guidance, to be submitted with Final Report for 2025-26 or at the completion of the evaluation if this occurs in advance of the close of the funding cycle



**California Home Visiting Program  
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 July 1, 2025- June 30, 2026**

Monitoring Mechanism	Due Date
<b>All reports and documentation are due via e-mail unless otherwise directed by CDPH/CHVP</b>	
Project Presentation	Annually as scheduled by CDPH/CHVP
Final Report <ul style="list-style-type: none"> <li>• Final Project Status Report</li> <li>• Final Evaluation Report</li> <li>• Staffing Report</li> <li>• Monthly Families Served Tracking Chart</li> <li>• Innovation Project Implementation Manual</li> </ul>	Project End (August 31, 2026 or sooner as applicable)
Presentation materials/documentation	As applicable, following participation in conferences, presentations, or other activities

**NOTE:** If compliance standards are not met in a timely manner, CHVP 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.

Sandy Tadeo

MCAH Director Name

*Sandy Tadeo*

MCAH Director Signature

9/4/2025

Date

**IN WITNESS WHEREOF**

**DEPARTMENT FISCAL REVIEW:**

By:   
Jenine Miller, Psy.D.,  
Director of Health Services

Date: 2/3/26

Budgeted: Yes  
Budget Unit: 4035  
Line Item: 82-5490, 82-5670  
Org/Object Code: HSMCAH-HSEXP;  
HSMCAH-HSHVP  
Grant: Yes  
Grant No.: CHVP 25-23 Mendocino

**COUNTY OF MENDOCINO**

By: \_\_\_\_\_  
BERNIE NORVELL, Chair  
BOARD OF SUPERVISORS

Date: \_\_\_\_\_

**ATTEST:**

DARCIE ANTLE, Clerk of said Board

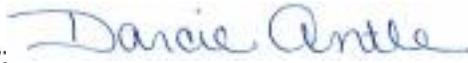
By: \_\_\_\_\_  
Deputy

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

DARCIE ANTLE, Clerk of said Board

By: \_\_\_\_\_  
Deputy

**INSURANCE REVIEW:**

By:   
Risk Management

Date: 02/03/2026

**CONTRACTOR/COMPANY NAME**

By: \_\_\_\_\_  
California Department of Public Health

Date: \_\_\_\_\_

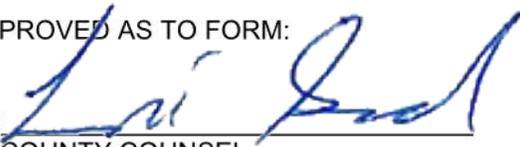
**NAME AND ADDRESS OF CONTRACTOR:**

California Department of Public Health  
P.O. Box 997420  
Sacramento, CA 95899-7420  
(916) 650-0300  
Christina.Jenkins@cdph.ca.gov

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

**COUNTY COUNSEL REVIEW:**

APPROVED AS TO FORM:

By:   
COUNTY COUNSEL

Date: 02/03/2026

**EXECUTIVE OFFICE/FISCAL REVIEW:**

By:   
Deputy CEO or Designee

Date: 02/03/2026

**Signatory Authority:** \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; **\$50,001+ Board of Supervisors**  
Exception to Bid Process Required/Completed  'N/A'  
Mendocino County Business License: Valid   
Exempt Pursuant to MCC Section: Government Entity