<u>Attachment 11</u>
Guidance to Determine the Number of Families to be Served

The following will help applicants determine how many families could be served at any one time and the recommended number of assessments needed to reach and maintain capacity. The cost per family for HFNY is currently estimated at $7,200 in upstate New York areas, $7,600 for Mid-Hudson areas and $8,000 for New York City programs, not including the required match funding or in-kind services. Every full-time worker should serve approximately 15 families at any one time.

Related formulas:

The minimum number of families to be <u>assessed</u> during the contract period. This should include an estimate of the average number of assessments that the Home Visitor will conduct each month in order for the program to achieve and maintain full capacity with the number of families to be served. This must take into account the projected acceptance rate (percentage of assessed families who actually enroll in home visiting services) and projected retention rate (percentage of enrolled families who remain in the program after one year). For capacity, consider that generally, programs have been successful at serving the number of families equivalent to 10 to 15 percent of Medicaid births in the county or counties proposed to be served.

The number of families to be <u>enrolled</u> in home visiting services <u>at any one time</u>.
The average caseload for each full-time Family Support Specialist is 15 families. Use this information and the number of Family Support Specialists listed in the projected budget to determine the program's capacity of the number of families that it can serve at any one time.

The total number of families to be <u>enrolled</u> in home visiting services <u>during the entire contract period</u>. This takes into account the program's capacity to serve families and the projected retention rate. Since the performance indicator is that the program retains at least 50% of its families for one year, this figure should be from 100% of program capacity to 150% of program capacity.

Use the information in column 1 and 4 in the following chart to help determine the number of assessments needed to achieve and maintain the program's capacity in a year's time.

Required Number of Assessments to Support a Program's Capacity				
Proposed Capacity	Estimated Year 1 Positive Referred Screens	Estimated Quarterly Positive Referred Screens	Estimated Year 1 Assessments	Estimated Quarterly Assessments
50	199	50	75	19
60	239	60	90	22
70	279	70	104	26
80	318	80	119	30
90	358	90	134	34
100	398	100	149	37
110	438	109	164	41
120	478	119	179	45
130	517	129	194	49
140	557	139	209	52
150	597	149	224	56
160	637	159	239	60
170	667	169	254	63
180	719	179	269	67
190	756	189	284	71
200	796	199	299	75
210	839	209	313	78
220	876	219	328	82
230	915	229	343	86
240	955	239	358	90
250	995	249	373	93