APPLICATION TO IMPLEMENT NEW HIPPY PROGRAM

HOME INSTRUCTION FOR PARENTS OF PRESCHOOL YOUNGSTERS (HIPPY) USA

APPLICATION GUIDELINES

Any community interested in implementing a HIPPY program must submit an application. This application provides the national office with essential information about both the prospective community and implementing agency. It gives the national office the opportunity to raise concerns and offer suggestions for a more successful implementation process. Submitting the application is a major step in starting a HIPPY program. If you are at this stage, you should already have in place an advisory group; potential funding sources; a clear understanding of the targeted community; and a familiarity with the basic HIPPY program requirements.

The application, along with all necessary documents, can be submitted to HIPPY at anytime during the year. Please be sure that your application is complete. Each application will be reviewed carefully and you will be contacted regarding any outstanding issues or concerns.

The following pages provide guidelines (format and content) to assist you in the development of the application. The application calls for comprehensive data. Our experience has shown that the more information we can mutually exchange at this point, the better your chances of success during the initial year of the HIPPY program. Recognizing that time is a precious commodity, we thank you in advance for taking this application process seriously.

Please Note: HIPPY sites currently operating in the United States have different organizational configurations. Many involve collaboration between two or more agencies. Sometimes the implementing agency is different from the funding agency, but both are actively involved in decision-making concerning the HIPPY program. It is important for us to understand your organizational/operational structure, which agencies are involved, and contributions these collaborations could contribute to the HIPPY program. When asked specific information about “your agency”, the reference is to the implementing agency. For example, if a community-based organization will implement the program, a local foundation will fund the program and a local volunteer organization will provide volunteer services, the “agency” referred to in this application would be the community-based organization.
I. COVER SHEET

Your application should begin with a cover sheet that includes the following information:

1. The name, general mailing address, email address, telephone and fax numbers of the agency proposing to implement this HIPPY program.

2. The service area (city, community, county) in which the families who to be served by this HIPPY program are residents.

3. The number of children and families you anticipate serving.

4. The number and status (full-time) of coordinators who will be hired to direct the program.

5. The name, title, mailing address, telephone and fax number(s) of the individual(s) authorized to sign the HIPPY USA Operating Agreement on behalf of this HIPPY Program.

6. The name, mailing address, telephone and fax number of the individual or department to whom invoices for HIPPY USA fees should be sent.

II. GENERAL STATEMENT OF NEED

Based on the information gathered in your community needs assessment, please write a brief summary describing the need for HIPPY in your community. This summary should include a general description of the community, as well as specific demographic data relating to the targeted population. In addition, the community characteristics information should be included to provide essential information that will help the national office understand local needs and the range of services that are available to families in your community.

III. ORGANIZATIONAL AND ADMINISTRATIVE STRUCTURE

1. Describe your agency, its mission and goals. (If the agency is a school, describe the mission and goals of the department under which the HIPPY program will operate.)

2. Attach an organizational chart of your agency.

3. Where in your organizational chart would HIPPY fit? Please explain this decision.

4. What steps will be taken to ensure that HIPPY and its staff members will be welcomed into the agency? What type of orientation will be provided to existing agency staff members/departments to ensure they understand the nature and scope of HIPPY?
5. Who will directly supervise the HIPPY coordinator? Either list experience and background of the supervisor or attach a resume. If a HIPPY coordinator has been identified, please provide us with that individual's résumé.

6. Does your agency have an employee manual? Have you considered how HIPPY employees will fit into its structure? Will modifications or amendments need to be made?

7. What are the geographical boundaries of your agency?

8. What community do you plan to serve? Please be as specific as possible. A service community may be defined entirely by geographic boundaries (such as a neighborhood, a school district, or a county), or by other criteria limiting the service community within those boundaries (such as families who meet income guidelines prescribed by a funder or families who already participate in an existing program, such as Head Start). A map with boundaries clearly marked, should also be included.

9. How will the HIPPY program be financed? Please list and explain the status of all secured funding and potential funding for your HIPPY program. Attach your proposed budget for HIPPY and its operations over the course of at least three years.

IV. INITIAL PROGRAMMATIC DECISIONS

1. How many children do you intend to serve? Which age(s) curriculum will you implement in year one? How many home visitors do you intend to hire? Will they be full or part time? How many hours will the home visitors work each week? Please review guidelines provided in Steps to Implementation, within the Start-Up Manual, and call the national office for additional guidance.

2. Describe the children/families you expect to recruit for the HIPPY program. What criteria will be used for selection?

3. How will children/families be recruited? What information on eligible children/families (files, contacts, existing waiting lists, etc.) is available for the coordinator when s/he begins recruitment?

4. What are some possible locations for group meetings? Please remember that group meeting facilities should be convenient, comfortable and appropriate for participating families.

5. What support systems (individuals, training, organizational structure) are currently available for the coordinator once she or he starts to implement the program?

6. What obstacles do you anticipate in the start-up year? How might you begin to overcome them?
Will the program use HIPPY USA’s Efforts to Outcomes software (ETO) to record data and track progress? If not, what data management system will be used?

V. ADDITIONAL SUPPORT FOR PROGRAM AND FAMILIES

1. What other programs or services does your agency provide that would be made available to the children and parents participating in HIPPY? How would these services be coordinated?

2. What other agencies, if any, will be involved with the HIPPY program? What role will each organization play, and how do they complement each other (for instance, what programs or services will be made available to families in HIPPY?).

3. List all members of the HIPPY advisory group. Include names, affiliations and position or title. If you do not have an advisory group, please explain why.

4. What role has the advisory group played so far in the process of starting a HIPPY program?

5. Describe how your agency receives community input when starting new projects or programs. How do you plan to ensure community involvement and support in implementing HIPPY?

VI. RESEARCH AND EVALUATION

HIPPY is an evidence-based model. In order to measure effectiveness, programs will evaluate parent and child outcomes annually to ensure quality programming and benefits to families.

1. Is your agency currently assessing parents to evaluate parent and child outcomes?

2. Is your agency currently assessing children before and after services are provided to measure outcomes?

3. Does your agency have resources available to support a research project in cooperation with HIPPY USA? If so, please list.

4. Are there agency staff members with research or program evaluation experience?

VII. LETTER(S) OF SUPPORT

Please include at least three letters of support from other (outside your agency) community organizations that will be supportive of your HIPPY program. (For example, such letters might come from the school district, a vocational training or an adult education center, social service agencies, other local early childhood programs, etc.).
Thank you very much for taking the time to complete this application.

Please be sure you have included:

- Cover sheet
- Program Description
- Community Needs Assessment
- Organizational chart
- Résumé of supervisor and/or HIPPY Coordinator
- Map delineating the geographic boundaries of HIPPY program
- Budget worksheet
- 3 Letters of support

Applications should be addressed to:

HIPPY USA  
ATTN: New Program Applications 
P.O. Box 1034 
Little Rock, Arkansas 72203-1034

A response will be provided within a few weeks. In the meantime, if you have any questions, please do not hesitate to call or email the HIPPY USA national office at 501.537.7726 or info@hippyusa.org.

Please remember to keep a copy of the full application for review and utilization by the coordinator.