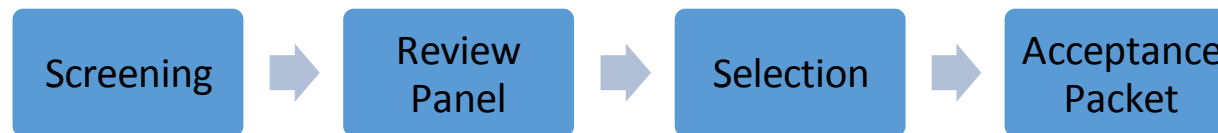


National Health Corps An AmeriCorps Program

Host Site Application: Screening, Review, and Selection Process



1. Each NHC operating site will send out a NHC Request for Proposals(RFP) no later than February 1st, 2018
2. Upon RFP receipt, host site applications will be screened by the NHC Program Director at each operating site using the Host Site Application: Screening Tool **A**.
3. If screened applications are deemed incomplete or require more information, the NHC Program Director at each operating site will contact the applicant and identify the information that is required. The applicant will be given 48 hours to complete the application and/or clarify questions.
4. In January of each year, current members will complete Host Site Member Assessment Tool **B** to provide feedback on their host site experience. This information will be used to determine if current host sites will qualify as returning host sites in the upcoming program year.
5. The NHC Program Director at each operating site will conduct an in-person, on-site visit for new applicants and evaluate each potential new host site using the **New Host Site Visit Checklist** (separate document) during the visit.
6. For both returning host sites and post- visit for each potential new host site, the NHC Program Director at each operating site will complete Host Site Assessment Tool **C**.
7. A panel of reviewers, comprised of a minimum of three individuals, will meet to review and discuss the applications and position descriptions for each new and returning host site. The review panel will then make a final selection score for each host site using Host Site Application: Selection Form **D**, which includes scores from Host Site Member Assessment Tool **B** and Host Site Assessment Tool **C**.

The panel is required to at a minimum include the program director at the NHC operating site, and two additional reviewers. One of the additional reviewers must be an external reviewer (alumni member, host site supervisor, etc.)

8. Applicants will be scored, and a recommendation will be given to each position description that the applicant has submitted. Recommendation options are 1) Select, 2) Select with conditions, or 3) Do not select.
9. Applications that are “Select with conditions” will be contacted by the NHC Program Director at each operating site to discuss the conditions and determine the next steps.
10. The review panel will determine a waiting list if the number of applicants exceeds the number of available positions. The wait list agencies will be selected if another agency cannot fulfill its responsibilities, additional funding is made available, or there is a need for an alternative host site during the program year.
11. A final decision will be made no later than April 1, 2018. The NHC Program Director will contact all applicants with the decision.
12. The NHC Program Director at each operating site will send all selected host sites a standardized NHC host site acceptance email and attach the standardized NHC host site offer letter, information sheet, commitment form, and member request form.
13. The NHC Program Director at each operating site will provide all accepted host sites with standardized host site agreements no later than September 1st, 2018.
14. Final position descriptions will be posted on the NHC operating site’s website no later than April 6th, 2018 for the member recruitment process.
15. The NHC Program Director at each operating site will provide all new and returning host site supervisors with a mandatory Pre-Service Orientation no later than September 1st, 2018.



NHC Operating Site Application: Screening Tool

Applicant Organization: _____

Screener Name: _____

Date: _____

Number of members requested: _____

Eligible for full review

Requires second screening

A

Instructions: Please circle “Yes” or “No” for each question. If “Yes” is selected for every question, the proposal meets screening criteria and is eligible to go on for review. If “No” is selected for *any* question, this application will require a second screening to confirm ineligibility and/or incompleteness.

Operating Site Application

Is the application complete?		
Does this organization meet AmeriCorps criteria as a 501(c) 3 or government e		
Does the organization’s mission complement the AmeriCorps/NHC mission?		
Does the organization have the appropriate infrastructure to support a NHC m		
Does the organization provide the name, job title, and contact information of t member’s immediate supervisor?		
Did the organization answer need and member role questions completely/clea		
Are all of the questions answered completely? If no, provide comments below.		
Comments:		
Is the organization’s commitments initialed?		
Are the signatures of approval complete?		

Member Position Description

Was application submitted electronically with the position description in Microsoft Word?	Yes	No
Does the position description identify the specific service sites(s) where a member will complete his or her service, including the full address of the site(s)?	Yes	No
Is the site supervisor information complete?	Yes	No
Is the organization description complete?	Yes	No
Does the position description provide the broad purposes that the organization is aiming to achieve, describe the community the program is designed to serve, and state the values and guiding principles which define its standards?	Yes	No
Does the position description provide a brief, specific title (1-3 words) of the service which accurately reflects the content, purpose, and scope of the member service position?	Yes	No
Does the position description provide a brief summary of the purpose of member service by outlining the duties and responsibilities of the member and how this role connects within the organization?	Yes	No
Is the Member Role section completed and clearly described?	Yes	No
Does the position description thoroughly define the member service activities in specific terms including quantifiable performance goals and projected accomplishments?	Yes	No
Are member activities and responsibilities clearly defined?	Yes	No
Does the member position description clearly describe recurring access to vulnerable populations as outlined in 45 CFR §2510.20 https://www.nationalservice.gov/sites/default/files/documents/fy13_12_1005_48.pdf	Yes	No
Does the position description include any vague activity descriptions such as “other duties as assigned?”	Yes	No
Are the position description outputs compatible with NHC goals and allowed activities?	Yes	No

<p>Does the position description describe activities that would place a member in a situation in which the member would be at risk for violating the AmeriCorps non-duplication and non-displacement requirements outlined in 45 CFR § 2540.100)?</p> <p>http://www.ecfr.gov/cgi-bin/textidx?SID=62ef430e421c0b565f20975d1a1906e5&node=pt45.4.2540&rgn=div5%23sp45.4.2540.b#se45.4.2540_1100</p>	Yes	No
<p>Does the position description clearly define how member activities will not duplicate and/or displace existing staff, volunteers or interns' duties at site?</p>	Yes	No
<p>Does the position description describe activities that would place a member in a situation in which the member would be at risk for engaging in AmeriCorps prohibited activities as outlined in 45 CFR §2520.65?</p> <p>https://www.nationalservice.gov/pdf/45CFR_chapterXXV.pdf</p>	Yes	No
<p>Does the position description clearly confirm that member will not be conducting AmeriCorps prohibited activities as outlined in 45 CFR §2520.65?</p> <p>https://www.nationalservice.gov/pdf/45CFR_chapterXXV.pdf</p>	Yes	No
<p>Does the position description describe activities that would place a member in a situation in which the member would be at risk for engaging in other AmeriCorps restricted activities as outlined in 45 CFR §2540.100?</p> <p>http://www.ecfr.gov/cgi-bin/textidx?SID=62ef430e421c0b565f20975d1a1906e5&node=pt45.4.2540&rgn=div5%23sp45.4.2540.b#se45.4.2540_1100</p>	Yes	No

Does this position description describe activities that would place a member in a situation where they could violate AmeriCorps regulations that prohibit members from participating in needle exchange programs directly or indirectly?	Yes	No
Are skills/qualifications, schedule, dress code, and travel information complete?	Yes	No
Will proposed activities provide a member with a quality year-long experience?	Yes	No
Will the member provide direct service to underserved individuals?	Yes	No
Do the activities correspond to NHC performance measures?	Yes	No
Does the position description list the minimum qualifications, training, or experience required to be successful in the position?	Yes	No
Does the position description include the days and hours of the week that the member will be expected to serve most commonly while in the position?	Yes	No
Does the position description ensure that each member has sufficient opportunity to complete the required number of hours of service to qualify for the AmeriCorps education award?	Yes	No
Does the position description account for holidays and other time off, and provide the member with sufficient opportunity to make up missed hours?	Yes	No
Does the position description provide information about member orientation, training, and development at the site?	Yes	No
Does the position description confirm that the member in this position will receive no more than 20 percent of the aggregate of the total member service hours as outlined in requirements of 45 CFR §2520.50? https://www.nationalservice.gov/pdf/45CFR_chapterXXV.pdf	Yes	No
Does the position description describe activities that could put member(s) at risk for exceeding the limitations on allowable fundraising activity as outlined in requirements of 45 CFR §§ 2520.40-.45? https://www.nationalservice.gov/pdf/45CFR_chapterXXV.pdf	Yes	No



NHC Host Site Member Assessment Tool

Member Name: _____

Service Term: _____

Host Site: _____

Site Mentor: _____

B

A) During Host Site Pre-Service Orientation and Training, did your host site mentor provide any of the following during their two week orientation process? Please mark all that apply.

- Overview of host-site organization and flow (an org chart, clinic flow processes, etc)
- Overview of target population served (demographics, etc)
- A list of contacts to help you with your service duties
- Introduce you to host-site staff and THEIR role in the organization
- Introduce you to host-site staff and YOUR role in the organization
- Take you to off-site locations where you will complete some of your service duties
- Give you examples, worksheets or training modules to assist you with your service duties
- Give you the necessary information to perform your service duties
- Give you hands-on experience to learn your service duties (practice taking height and weight, practice filling out medication assistance applications, etc)
- Give you an accurate description of day to day activities you would be completing
- Allow you to shadow your mentor or other site staff that perform similar service duties as you
- Shadow your service duties and give feedback before letting you serve independently
- Show a genuine interest in you professionally
- Ask you about your professional career goals
- Involve you in staff meetings and/or events
- Give rationale for hosting an AmeriCorps member at the host site

___ Review service expectations as a NHC member at the host site organization

B) Ongoing Host Site Support: please circle the most appropriate response.

1. Do employees that you regularly interact with (3 or more days per week) understand your role as an AmeriCorps member? **Yes** or **No**
2. Have you given a presentation that explains your service role to the host site staff? **Yes** or **No**
3. Is your host site mentor's office physically located at your host site? **Yes** or **No**
4. Do you have regular one-on-one, uninterrupted weekly meetings with your site mentor? **Yes** or **No**
5. How easy is it to communicate your needs to your site mentor and receive a response within 24 hours (if you had a question about your service duties or wanted to bounce some ideas off of your mentor) **Difficult** or **Moderate** or **Easy**
6. Do you participate in on-going staff meetings? **Yes** or **No**
7. Does your site mentor support your professional development and career goals (provide suggested trainings, give advice, help you network, etc.)? **Yes** or **No**
8. Is your host site mentor understanding of your NHC program participation in all program components (committee meetings, outside service, etc.)? **Yes** or **No**
9. Do you feel like part of the team at your host site? **Yes** or **No**

C) Do your weekly meetings with your site mentor include any of the following? Please mark all that apply.

- ___ Positive feedback on your service duties
___ Constructive criticisms on your service duties
___ Your professional goals

D) Service Activities

1. Are your service activities enough to keep you consistently utilized 40 hours per week at your host site? **Yes** or **Most of the time** or **Some of the time** or **No**
2. Are the service activities you perform "meaningful" (i.e. direct service, varied, align with NHC mission and Performance Measures?) **Yes** or **Most of the time** or **Some of the time** or **No**
3. Does your position description accurately reflect the service activities you perform? **Yes** or **Somewhat** or **No**
4. Would you recommend that your site be a site next year? **Yes** or **Maybe; there is potential** or **No**

E) In an ideal situation, please describe a structured 2-day orientation plan that you feel next year's member would benefit from receiving knowing what you know now. Add any additional training ideas you'd suggest be completed at the host site.

F) Please list the major skills needed to perform your site service duties:



NHC Host Site Assessment Tool

Completed by NHC Program Director for both new and returning host sites

Host Site Applicant: _____

Site Mentor: _____

Date of Site Visit: _____

C

Instructions: For each criterion, provide a rating from 0 to 4 where **0 = poor, 1 = fair, 2 = average, 3 = good, 4 = excellent**. Please provide comments when necessary.

Potential Infrastructure

Expectation	Score	Comments:
Member(s) will have office space, necessary supplies and materials, and administrative support and equipment, including telephone, computer, and desk, in order to complete his/her services.		
Potential host site has provided process/timeline for getting member(s) access to email, on-site systems, etc.		
Accessibility of site mentor to member (i.e. location, position within organization, office hours etc.).		
Potential host site has demonstrated ability to comply with partnership requirements (ready to sign partnership contract, provided contact information for contracts and finance departments, validated ability to pay by deadline, etc.)		

Potential Site Support

Expectation	Score	Comments:
Indication of site supervisor’s commitment to meet with member on a weekly basis to provide feedback, support, guidance and ongoing professional development to member.		
Capacity of site supervisor to ensure/maintain member accountability, member development, program development, and complete program timesheets in a timely manner.		
Availability of supervisor to complete and participate in programmatic responsibilities including but not limited to Pre-Service Orientation and quarterly mentor meetings as scheduled by the NHC Operating Site Program Director.		
Availability within member position for member to participate in programmatic duties such as monthly member meetings, trainings, group service projects, etc. as determined by NHC Operating Site.		

Potential Service Activities

Expectation	Score	Comments:
Service activities proposed will provide a valuable direct service experience and align with NHC performance measures.		
Likelihood that service activities proposed will provide full-time (40) hours each week for the entire service term.		
Site supervisor demonstrates an understanding of prohibited member activities established by the AmeriCorps and NHC.		
Site supervisor demonstrates an understanding of AmeriCorps non-displacement and role duplication regulations.		

Service activities proposed are compliant with AmeriCorps non-displacement and role duplication regulations.		
Other Comments:		

Overall impression of potential:

Total Score: _____ /48

Scoring key for Selection Form:

0 (total = 0-9) **1** (total = 10-19) **2** (total = 20-29) **3** (total = 30-39) **4** (total = 40-48)

<p>Score 0-4 for #7 on Selection Form D: <input data-bbox="1822 836 1900 917" type="text"/></p>
--



NHC Host Site Application: Panel Review Selection Form

Applicant Organization: _____

Service Position: _____

Number of members requested: _____ Date of panel: _____

D

Instructions: For each criterion, provide a rating from 0 to 4 where **0 = poor, 1 = fair, 2 = average, 3 = good, 4 = excellent**. Please provide comments when necessary.

_____ 1. **Quality of the service activities proposed** (*clarity of described activities and outputs; potential that activities will provide valuable direct service experience; level of compatibility with NHC goals and objectives*)

Comments:

_____ 2. **Feasibility of the service activities proposed** (*likelihood that activities can be performed and completed within project period, fulfill 1700 hours, provide a year-long experience, etc.*)

Comments:

_____ 3. **Applicability of the proposed service activities to the Performance Measures of the NHC** (*services fall in at least one of the NHC performance measures*)

Comments:

_____ 4. **Level and amount of professional training and development opportunities offered**
(quality of described opportunities; likelihood that opportunities would enhance professional growth)

Comments:

_____ 5. **Commitment to supervising and supporting member(s)** *(as indicated by organizational infrastructure and position of supervisor)*

Comments:

_____ 6a. **Previous sites: Past member experiences** *(as indicated by member ratings on Host Site Member Assessment Tool B)*

_____ 6b. **Previous sites: Past member experiences** *(as indicated by member feedback and cooperation in resolving past issues)*

Comments:

_____ 7. **New and previous sites: Site Potential** *(as indicated by NHC Program Director's evaluation of site via Host Site Assessment Tool C)*

Comments:

Overall application strengths:

Overall application weaknesses:

Panel recommendation:

- Select site (scores 22-32 for previous sites / scores 17-24 for new sites)
- Select site with conditions (list recommended conditions below) (scores 11-21 for previous sites / scores 9-16 for new sites)
- Do not select site (scores 0-10 for previous sites / score 0-8 for new sites)

Selection conditions (if any):

Agency Notification by Program Director:

Date: _____ Method: _____

Agency Response:

Contact Name/Title: _____ Date: _____

Method: _____ Response: Accept Reject Other