

THE SUPPORTING STATEMENT

Affordable Care Act Tribal Maternal, Infant, and Early Childhood Home Visiting Program Needs Assessment and Plan for Responding to Identified Needs

Specific Instructions

A. Justification

1. Circumstances Making the Collection of Information Necessary

Section 511(h)(2)(A) of Title V of the Social Security Act, as added by Section 2951 of the Patient Protection and Affordable Care Act of 2010 (Pub. L. 111-148, Affordable Care Act or ACA) authorizes the Secretary of HHS to award grants to Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to conduct an early childhood home visiting program. The legislation sets aside 3 percent of the total ACA Maternal, Infant, and Early Childhood Home Visiting Program appropriation (authorized in Section 511(j)) for grants to Tribal entities and requires that the Tribal grants, to the greatest extent practicable, be consistent with the requirements of the Maternal, Infant, and Early Childhood Home Visiting Program grants to States and territories (authorized in Section 511(c)), and include conducting a needs assessment and establishing benchmarks.

The Administration for Children and Families, Office of Child Care, in collaboration with the Health Resources and Services Administration, Maternal and Child Health Bureau, recently awarded grants for the Tribal Maternal, Infant, and Early Childhood Home Visiting Program (Tribal Home Visiting). The Tribal Home Visiting grant awards will support 5-year cooperative agreements to conduct community needs assessments, plan for and implement high-quality, culturally-relevant, evidence-based home visiting programs in at-risk Tribal communities for pregnant women and families with young children aged birth to kindergarten entry, and participate in research and evaluation activities to build the knowledge base on home visiting among Native populations. Home visiting programs are intended to promote outcomes such as improvements in maternal and prenatal health, infant health, and child health and development; reduced child maltreatment; improved parenting practices related to child development outcomes; improved school readiness; improved family socio-economic status; improved coordination of referrals to community resources and supports; and reduced incidence of injuries, crime, and domestic violence.

In Phase 1 (Year 1) of the cooperative agreement, grantees must (1) conduct a comprehensive community needs assessment and (2) develop a plan and begin to build capacity to respond to identified needs. Grantees will be expected to submit the needs assessment and plan for responding to identified needs through an evidence-based home visiting program within 10 months of the Year 1 award date. Grantees may engage in needs assessment, planning, and capacity-building activities during Phase 1, but will not

fully implement their plan and/or begin serving children and families through high-quality, evidence-based home visiting programs. Pending successful Phase 1 activities and submission (within 10 months of Year 1 award date) of a non-competing continuation application that includes a needs assessment and approvable plan for responding to identified needs, funds will be provided for Phase 2 (Implementation Phase, Years 2-5).

2. Purpose and Use of the Information Collection

The purpose of the information collection is to receive Tribal Home Visiting Program grantees' needs assessments and plans for responding to identified needs (Phase 2 Implementation Plan) so that they can be reviewed and approved as a condition for receiving non-competing continuation funding for program implementation in Phase 2 (Implementation Phase, Years 2-5). In addition, the information collection will provide valuable information to HHS that will guide the provision of technical assistance to Tribal Home Visiting Program grantees.

3. Use of Improved Information Technology and Burden Reduction

This information will be collected through electronic submission by email.

4. Efforts to Identify Duplication and Use of Similar Information

The information is not available from any other source.

5. Impact on Small Businesses or Other Small Entities

The information being requested has been held to the absolute minimum required for the intended use.

6. Consequences of Collecting the Information Less Frequently

This is a one-time submission that Tribal Home Visiting grantees make as a condition of receiving funds for Phase 2 of their grant.

7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

The collection of information will be conducted in accordance with 5 CFR 1320.5.

8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

There were no comments submitted in response to the 60-day Federal Register Notice. HHS will work closely with grantees as they develop their implementation plans and continuation applications, per the cooperative agreement mechanism.

9. Explanation of Any Payment or Gift to Respondents

No payments or gifts are provided to respondents.

10. Assurance of Confidentiality Provided to Respondents

The information collection not of a confidential nature, and therefore does not require assurance of confidentiality.

11. Justification for Sensitive Questions

There are no personal questions of a sensitive nature.

12. Estimates of Annualized Burden Hours and Costs

Instrument	Number of Respondents	Number of Responses per Respondent	Average Burden Hours Per Response	Total Burden Hours
Affordable Care Act Tribal Maternal, Infant, and Early Childhood Home Visiting Program Needs Assessment and Plan for Responding to Identified Needs	18	1	100	1,800

13. Estimates of Other Total Annual Cost Burden to Respondents and Record Keepers

None.

14. Annualized Cost to the Federal Government

None.

15. Explanation for Program Changes or Adjustments

Not applicable; this is a new data collection.

16. Plans for Tabulation and Publication and Project Time Schedule

Per the FY 2010 Funding Opportunity Announcement (HHS-2010-ACF-OFA-TH-0134) for the Tribal Home Visiting Program, prior to the end of the 3rd quarter after the Year 1

award date, ACF must provide grantees with detailed guidance for submitting both the needs assessment and plan for responding to identified needs (i.e., Phase 2 implementation plan). FY 2010 grantees are expected to submit the needs assessment and implementation plan, along with their non-competing continuation application for Year 2 funds, within 10 months of the Year 1 award date (i.e., no later than July 31, 2011).

17. Reason(s) Display of OMB Expiration Date is Inappropriate

Not applicable.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions.

B. Statistical Methods (used for collection of information employing statistical methods)

Not applicable. Statistical methods will not be used for data collection. Per the FY 2010 Funding Opportunity Announcement (HHS-2010-ACF-OFA-TH-0134) for the Tribal Home Visiting Program, in order to release funding for program implementation, each tribal entity is required to submit a non-competing continuation application that includes a needs assessment and approvable plan for responding to identified community needs.