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**ATTACHMENT 7: MIHOPE STATE ADMINISTRATOR
INTERVIEW_BASELINE**

5/29/2012

STATE ADMINISTRATOR INTERVIEW - BASELINE

The U.S. Department of Health and Human Services has contracted with MDRC to evaluate the federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program.

The Mother and Infant Home Visiting Program Evaluation (MIHOPE) is designed to build knowledge for policymakers and practitioners about the effectiveness of MIECHV.

Your answers will be kept confidential. Only the research team will have access to this information. Your answers will not be shared with anyone at your program or any other agencies. In our research reports, the information you provide will not be attributed by name to you or your individual program.

One objective of MIHOPE is to learn how implementing agencies and other organizations work together to design and implement home visiting program services. We are requesting that you participate in this interview because you are a state administrator of one of the states participating in MIHOPE. Your answers will help us understand your state's home visiting programs and implementation systems.

The following request will be sent to the state MIECHV Administrator approximately one month before the interview:

Before we meet to discuss your state's MIECHV program, please provide us with the written contracts you are using with the sites participating in the MIECHV evaluation (MIHOPE). These materials will help us to use your time most efficiently by focusing our discussion on aspects of the program that are not available in writing.

Timing of Interview

The interview will occur either in-person or via phone around the time the site's first families are enrolled in the study.

Purpose of Interview

The purpose of this interview is to understand more about your experiences at the state level implementing the MIECHV program. Your experience and opinions are very important to us, and we want to thank you for taking the time to speak with us.

Your comments will remain confidential, and we will not quote your name in any publications or presentations about this project. Do you have any questions for me before we begin?

A. PAST HISTORY OF THIS STATE AGENCY IN ADMINISTERING HOME VISITING PROGRAMS

Some MIECHV lead agencies were involved in home visiting programs before this program began, and some were not. Please describe briefly your agency's involvement in home visiting before launching your MIECHV program. [INTERVIEWER: CHECK ALL THAT APPLY.]

1. Did your agency fund home visiting programs prior to MIECHV?
 - Yes
 - No [SKIP TO 3]

2. Which home visiting program(s) did your agency fund?
 - NFP
 - HFA
 - PAT
 - EHS
 - Other program models
 - Did not require a specific model in order for site to receive funding

3. Did your state have a state-operated home visiting program prior to the enactment of MIECHV?
 - Yes
 - No

4. Did your agency play a role in developing infrastructure such as MIS systems, intake processes or other implementation strategies before MIECHV?
 - MIS
 - Intake processes
 - Other implementation strategies (specify) _____

5. Did any other state agencies also fund home visiting programs?
 - Yes
 - No [SKIP TO NEXT SECTION]

6. Which state agenc(ies)?

7. Which home visiting program(s)?

- NFP
- HFA
- PAT
- EHS
- Other program models
- Models varied / Did not require a specific model in order for site to receive funding
- Not sure

8. If multiple state agencies funded home visiting, did the agencies work collaboratively on these programs prior to MIECHV?

- Yes
- No

B. DEVELOPMENT OF STATE NEEDS ASSESSMENTS

1. As I understand from your FY10 state plan, [XX, YY, and ZZ] were key stakeholders in the developing the needs assessment and developing the state plan. Is that correct?

- Yes
- No

2. Who else was significantly involved (such as other state agencies, model developers, community representatives, etc.)?

3. Please describe the general decision process and how the different stakeholders were part of this process.

C. USE OF THE NEEDS ASSESSMENT TO CHOOSE TARGET COMMUNITIES

Now we'll get into some more specifics about how you developed your needs assessments and how those informed decisions about your program.

1. I understand that [XX, YY, and ZZ] are communities that are targeted in your state plan for FY10, FY11, and/or FY12.

Is this correct?

- Yes, partly
- Yes, fully [SKIP TO 3]
- No

2. What are the targeted communities?

3. How did your state go about identifying these communities to be part of MIECHV?

4. Were the needs assessments used in this process?

- Yes
- No [SKIP TO 6]

5. How were the needs assessments used in this process?

6. What other needs assessments did your state build on and how useful did you find those for this particular purpose?

7. Did you rank communities to help identify priority communities?

- Yes
- No [SKIP TO 9]

8. How did you rank communities to identify priority communities?

9. Did the set of targeted communities differ between the 2010 and 2011 plans (and competitive plan if applicable)?

- Yes
- No [SKIP TO 11]

10. How did the set of targeted communities differ between the 2010 and 2011 plans (and competitive plan if applicable)?

11. Has the set of targeted communities changed since your submitted your 2011 plan (and competitive plan if applicable, for example due to the FY12 update)?

- Yes
- No [SKIP TO 13]

12. How has the set of targeted communities changed since your submitted your 2011 plan (and competitive plan if applicable)?

13. Do you anticipate this set of communities changing in future state MIECHV plans?

- Yes
- No [SKIP TO NEXT SECTION]

14. How do you anticipate this set of communities changing in future state MIECHV plans?

D. USE OF THE NEEDS ASSESSMENT TO CHOOSE TARGET SUBGROUPS

Now I have a similar set of questions about how your state went about choosing subgroups of families to target with your MIECHV program.

1. I understand that [XX, YY, and ZZ] are populations that are particularly targeted by your MIECHV program. Is this correct?

- Yes, partly
- Yes, fully [SKIP TO 3]
- No

2. What are the targeted populations?

3. How did your state go about identifying populations to be targeted in your MIECHV program?

4. Were the needs assessments used in this process?

- Yes
- No [SKIP TO 6]

5. How were the needs assessments used in this process?

6. What other needs assessments did your state build on and how useful did you find those for this particular purpose?

7. Did you rank populations to help identify priority groups?

- Yes
- No [SKIP TO 9]

8. How did you rank populations to help identify priority groups?

9. Did the set of targeted populations change between the 2010 and 2011 plans (and competitive plan if applicable)?

- Yes
- No [SKIP TO 11]

10. How did the set of targeted populations change between the 2010 and 2011 plans (and competitive plan if applicable)?

11. Has the set of targeted populations changed since you submitted your 2011 plans (and competitive plan if applicable) , for example due to the FY12 update?

- Yes
- No [SKIP TO 13]

12. How has the set of targeted populations changed since you submitted your 2011 plans (and competitive plan if applicable)?

13. Do you anticipate this set of target groups changing in future state MIECHV plans?

- Yes
- No [SKIP TO NEXT SECTION]

14. How do you anticipate this set of target groups changing in future state MIECHV plans?

E. CHOICE OF EVIDENCE-BASED PROGRAM MODEL

1. I understand that your program is funding program sites that are using the [XX, YY, and ZZ] national model(s). Is this correct?

- Yes, partly
- Yes, fully [SKIP TO 3]
- No

2. What models are you using?

3. How did your state go about deciding which national program model(s) to use?

4. Were the needs assessments used in making this decision?

- Yes
- No [SKIP TO 6]

5. In what ways did the needs assessments inform your decision?

6. Have you made any changes in your selection of models since your FY11 state plan (or competitive plan, if applicable) was submitted, for example due to the FY12 update?

- Yes
- No [SKIP TO 8]

7. If so, please describe those changes.

8. Do you anticipate this set of models changing in future state MIECHV plans?

- Yes
- No [SKIP TO NEXT SECTION]

9. How do you anticipate this set of models changing in future state MIECHV plans?

F. CURRENT INVOLVEMENT OF STAKEHOLDERS IN PLANNING PROCESS

1. You mentioned that [XX, YY, and ZZ] were involved in the initial decision process in MIECHV. To what extent, and through what mechanisms, are these stakeholders part of the continuing planning process for MIECHV? [INTERVIEWER: CHECK ANY THAT APPLY AND DESCRIBE IF NEEDED].

- State MIECHV task force
- Regularly scheduled meetings between particular stakeholders.
Which ones? (specify): _____
- MOUs between state agencies
For what purposes? (specify): _____
- Other formal mechanisms (specify): _____

G. OTHER HOME VISITING PROGRAMS OPERATING IN POTENTIAL EVALUATION COMMUNITIES

[INTERVIEWER DESCRIBES]. Your needs assessment provided information about the other home visiting programs that were available in the communities that might be included in the national evaluation.

1. Is it your understanding that these models/programs are still operating in these communities?
- Yes [SKIP TO 3]
- No

2. Why are they not being implemented anymore?

3. Are you aware of any other home visiting models being implemented in these communities that were not mentioned in your state plan?

H. OTHER CHANGES IN STATE'S MIECHV PROGRAM SINCE STATE 2011 PLAN WAS SUBMITTED

1. Have you made any other fundamental changes to your MIECHV formula program since your FY11 state plan was submitted, beyond those that we already discussed, for example due to the FY12 update? These might be changes in communities, target populations, national models, or other aspects of your program. *Please answer even if MIHOPE sites were not involved.*

- Yes
- No [SKIP TO QUESTION 3]

2. Can you describe those changes? Why were these changes made?

3. Have you made any other fundamental changes to your MIECHV competitive program since your FY11 state plan was submitted, beyond those that we already discussed?

- Yes
- No [SKIP TO SECTION I]

4. Can you describe those changes? Why were these changes made?

I. STATE DECISIONS TO CHANGE ELIGIBILITY CRITERIA, ADAPTATIONS, OR ENHANCEMENTS RELATIVE TO NATIONAL MODELS

1. Has the state made any decisions about eligibility criteria for MIECHV that narrow or broaden the eligibility criteria relative to the eligibility criteria usually used by the national models being used in your MIECHV program?

- Yes
- No [SKIP TO 4]

2. Can you describe those changes?

3. Who advocated for these changes relative to the national model?

- Local site
- State lead agency / state plan
- Another state agency (specify): _____
- National program model
- Federal government
- Other entity (specify): _____
- Collaboration among stakeholders

4. Has the state asked the local MIECHV programs to implement any adaptations to the national models?

- Yes
- No [SKIP TO 7]

5. Can you describe those changes?

6. Who advocated for these changes relative to the national model?

- Local site
- State lead agency / state plan
- Another state agency (specify): _____
- National program model
- Federal government
- Other entity (specify): _____
- Collaboration among stakeholders

7. Has the state asked the local MIECHV programs to adopt any enhancements to the national models?

- Yes
- No [SKIP TO SECTION J]

8. Can you describe those changes?

9. Who advocated for these changes relative to the national model?

J. ACCOUNTABILITY MECHANISMS

[INTERVIEWER WILL HAVE A LIST OF FEDERAL BENCHMARK DOMAINS TO REFER TO IF NEEDED]. As part of MIECHV, states are required to monitor and periodically report on the federal benchmark areas.

1. Please describe your state's system for collecting and analyzing benchmark data.

2. At the state level, how do you use or plan to use the information you collect about federal benchmarks? [INTERVIEWER: CHECK ALL THAT APPLY]

- Primarily for federal reporting purposes
- To identify needs for technical assistance to programs
- To identify training needs for staff
- Benchmarks are incorporated into our state's contracts with local MIECHV programs
- For state CQI purposes
- Other (specify): _____

3. How is the funding awarded to local MIECHV programs in your state?

4. If by contract, is performance reporting incorporated into the contracts?

5. What does the state consider programs to be accountable for?

6. What are the consequences if the programs do not meet their performance requirements?

7. What additional monitoring mechanisms are used?

8. Do you have a state level MIS system for your MIECHV program?

- Yes, some program sites use it (List which ones: _____)
- Yes, all program sites use it
- No [SKIP TO 11]

9. What kind of information does it collect?

- Family eligibility information
 - Dates / types of services delivered
 - Screening results for children
 - Screening results for parents
 - Outcomes for children
 - Outcomes for parents
 - Provision of information activities
 - Education activities
 - Support activities
 - Referrals
 - Benchmark area-related indicators
 - Other(s)
- _____

10. What levels of staff and management receive reports from this MIS system?

11. How frequently are these reports generated and how are they used?

12. Does your state have a Continuous Quality Improvement (CQI) plan?

- Yes
- No [SKIP TO 13]

13. What CQI activities do you have in place now?

14. Who is responsible for implementing the CQI plan?

15. Is your current MIS system sufficient for the CQI processes you would like to use?

- Yes
 No

K. THE ROLE OF STATE MIECHV LEAD AGENCY AND OTHER INFLUENTIAL ORGANIZATIONS IN LOCAL MIECHV IMPLEMENTATION

Thank you for sending the written guidance that you have provided to your MIECHV sites. Those have helped us get a sense of where you are in launching the program.

Instructions: We'd like to hear a little bit more about the roles of different organizations in shaping the program. In this section, we will ask about the role of various organizations in determining aspects of program implementation. We will start with the role of the national program model.

1. What kind of role did the national program model have in determining:
 - a. Eligibility rules / timing of families' entry into the program.
 Active role
 No role
 - b. Intended duration of home visiting services for families.
 Active role
 No role
 - c. Hiring qualifications for home visitors and supervisors.
 Active role
 No role
 - d. Training offered to home visitors.
 Active role
 No role
 - e. Supervision for home visitors.
 Active role
 No role
 - f. Performance accountability and management reporting systems.
 Active role
 No role

2. What kind of role did the agency operating the local program have in determining:

- a. Eligibility rules / timing of families' entry into the program.
 - Active role
 - No role
- b. Intended duration of home visiting services for families.
 - Active role
 - No role
- c. Hiring qualifications for home visitors and supervisors.
 - Active role
 - No role
- d. Training offered to home visitors.
 - Active role
 - No role
- e. Supervision for home visitors.
 - Active role
 - No role
- f. Performance accountability and management reporting systems.
 - Active role
 - No role

3. What kind of role did the state's Title V agency have in determining:

- a. Eligibility rules / timing of families' entry into the program.
 - Active role
 - No role
- b. Intended duration of home visiting services for families.
 - Active role
 - No role
- c. Hiring qualifications for home visitors and supervisors.
 - Active role
 - No role

- d. Training offered to home visitors.
 - Active role
 - No role

 - e. Supervision for home visitors.
 - Active role
 - No role

 - f. Performance accountability and management reporting systems.
 - Active role
 - No role
4. What kind of role did the state agency for Title II of the Child Abuse Prevention and Treatment Act (CAPTA) have in determining:
- a. Eligibility rules / timing of families' entry into the program.
 - Active role
 - No role

 - b. Intended duration of home visiting services for families.
 - Active role
 - No role

 - c. Hiring qualifications for home visitors and supervisors.
 - Active role
 - No role

 - d. Training offered to home visitors.
 - Active role
 - No role

 - e. Supervision for home visitors.
 - Active role
 - No role

 - f. Performance accountability and management reporting systems.
 - Active role
 - No role

5. What kind of role did the state child welfare agency have in determining:
- a. Eligibility rules / timing of families' entry into the program.
 - Active role
 - No role
 - b. Intended duration of home visiting services for families.
 - Active role
 - No role
 - c. Hiring qualifications for home visitors and supervisors.
 - Active role
 - No role
 - d. Training offered to home visitors.
 - Active role
 - No role
 - e. Supervision for home visitors.
 - Active role
 - No role
 - f. Performance accountability and management reporting systems.
 - Active role
 - No role
6. What kind of role did the single state agency for substance abuse services have in determining:
- a. Eligibility rules / timing of families' entry into the program.
 - Active role
 - No role
 - b. Intended duration of home visiting services for families.
 - Active role
 - No role
 - c. Hiring qualifications for home visitors and supervisors.
 - Active role
 - No role

d. Training offered to home visitors.

- Active role
- No role

e. Supervision for home visitors.

- Active role
- No role

f. Performance accountability and management reporting systems.

- Active role
- No role

7. ***In addition, if any of the following agencies play an active role in shaping the program, please describe their roles as well:***

- A. The state's Child Care and Development Fund (CCDF)
- B. Director of the state's Head Start State Collaboration Office
- C. The State Advisory Council on Early Childhood Education and Care authorized by 642B(b)(1)(A)(i) of the Head Start Act.
- D. The state's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency(ies);
- E. The state's Elementary and Secondary Education Act Title I or State pre-kindergarten program;
- F. The State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program).
- G. The State's Domestic Violence Coalition
- H. The State's Mental Health agency
- I. The State's Public Health agency
- J. The State's identified agency charged with crime reduction
- K. The State's Temporary Assistance for Needy Families agency
- L. The State's Supplemental Nutrition Assistance Program agency
- M. The State's Injury Prevention and Control (Public Health Injury Surveillance and Prevention) program (if applicable)

8. For areas where you have mentioned an active role for one or more of these stakeholders, please describe how each of these entities has played a role in these programmatic decisions.

L. STATE PERSPECTIVES ON PROGRAM GOALS AND OUTCOMES

Instructions: In this section, we would like to learn how state administrators perceive their state's intended outcomes, as well as any training or TA provided to achieve those outcomes. Home visiting programs vary in the outcomes they try to achieve with families. In general, a program outcome is a benefit to a child, parent, or family. For example, some states might see the improvement of prenatal health as an important outcome.

Below is a list of possible outcomes. We know your state may care about all of these benefits for your families. However, we would like to get a sense of which outcomes your state has identified as more important than others. We would like you to check the box that best represents what you think your state MIECHV program believes about the outcome. **To help you decide on an outcome's rank, think about whether it is discussed routinely in training and in communication to local agencies and programs.**

1. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting good prenatal health, such as diet, exercise, rest, and not smoking?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority		Highest Priority			

2. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is preventing poor birth outcomes such as pre-term birth and low birth weight?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority		Highest Priority			

3. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting breastfeeding?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority					Moderate Priority		Highest Priority			

at All

4. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting maternal physical health outside of pregnancy such as good nutrition, exercise, and rest?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					Priority
at All										

5. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting family planning and birth spacing?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					Priority
at All										

6. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is preventing and reducing tobacco use?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					Priority
at All										

7. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is preventing and reducing mental health and substance use problems?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					Priority
at All										

8. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is preventing and reducing domestic violence?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority			Highest Priority		

9. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting family economic self-sufficiency such as reaching goals for employment and education?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority			Highest Priority		

10. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting child preventive care such as having all recommended well-child visits, being up-to-date on immunizations, and having parents baby-proof their home to prevent injuries?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority			Highest Priority		

11. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting positive parenting behaviors, such as nurturing, encouraging the child's learning, and using positive behavior management techniques?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority			Highest Priority		

12. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is preventing and reducing child abuse and neglect?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority			Highest Priority		

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13. Considering all of the outcomes your state MIECHV program aims to achieve, how much of a priority is promoting child cognitive and language development and social- emotional well-being?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority					Highest Priority

We are also interested in understanding the amount of training and TA provided by your state to achieve each outcome.

14. How much training and TA does your state provide to sites to address maternal health behaviors during pregnancy?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

15. How much training and TA does your state provide to sites to improve prenatal health outcomes?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

16. How much training and TA does your state provide to sites to promote breastfeeding?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

17. How much training and TA does your state provide to sites to promote maternal physical health outside of pregnancy?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

18. How much training and TA does your state provide to sites to improve promote family planning and birth spacing?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA

D. Not sure

19. How much training and TA does your state provide to sites to prevent and reduce tobacco use?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

20. How much training and TA does your state provide to sites to prevent and reduce mental health and substance use problems?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

21. How much training and TA does your state provide to sites to prevent and reduce domestic violence?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

22. How much training and TA does your state provide to sites to promote family economic self-sufficiency?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

23. How much training and TA does your state provide to sites to promote child preventive care?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

24. How much training and TA does your state provide to sites to promote positive parenting behaviors?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

25. How much training and TA does your state provide to sites to prevent and reduce child abuse and neglect?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

26. How much training and TA does your state provide to sites to promote child cognitive and language development and social- emotional well-being?

- A. A lot of training and TA
- B. Some training and TA
- C. No training and TA
- D. Not sure

M. STATE PERSPECTIVES ON PROMISE AND CHALLENGES OF MIECHV HOME VISITING

Now we'll talk a little more about actually putting this program into operation.

1. When you think about implementing your state's MIECHV program, what is the one thing that excites you the most about this program?

2. What is the one thing that worries you the most?

3. Which of the following statements best describes the role of home visiting in your state's early childhood system?

- Home visiting has a well-specified role to play in our state's system of early childhood programs.
- Within the next few years, I expect home visiting to have a well-specified role in our state's system of early childhood programs.
- Home visiting does not have a clear role in our state's early childhood system and based on my state's track record, it is hard to know how many years it will be before that changes.

OMB Control No: _____

Expiration Date: _____

4. Is there anything else that you think we should know, in order to understand your MIECHV program and the organizations that have influenced its development?
