OMB Control No: _____ Expiration Date: _____ Length of time for instrument: 2.00 hours

ATTACHMENT 7: MIHOPE STATE ADMINISTRATOR INTERVIEW_BASELINE

5/29/2012 Edited 9/12/2012

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.

MIHOPE gathers information from many different perspectives—state administrators, home visiting program staff, community service providers, and families.

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. We are also enclosing a list of agencies or organizations that may or may not be involved in your state's MIECHV program. Prior to our interview, please indicate on the form if an organization was involved in shaping or changing a particular aspect of the MIECHV program. This will help facilitate our conversation.

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. In this section, we will ask about your agency's involvement in home visiting before launching your MIECHV program.

- 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
 - \Box Other program models
 - \Box 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?

 - □ 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)?
 - NFPHFAPAT

 \Box 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 actively involved (such as other state agencies, model developers, community representatives, etc.)? [CHECK ALL THAT APPLY]
 - □ National program model or developer
 - □ Federal government
 - \Box State agency operating MIECHV program
 - \Box Agency operating the local program
 - \Box State's Title V agency
 - \Box Title II of the Child Abuse Prevention
 - □ State child welfare agency
 - \Box Single state agency for substance abuse services
 - □ State's Child Care and Development Fund (CCDF)
 - □ Director of the State's Head Start State Collaboration Office

 \Box State Advisory Council on Early Childhood Education and Care authorized by 642B(b) (1)(A)(i) of the Head Start Act

□ State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

□ State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

- \Box State's Domestic Violence Coalition
- □ State's Mental Health agency
- □ State's Public Health agency
- \Box State agency charged with crime reduction
- □ State's Temporary Assistance for Needy Families (TANF) agency
- \Box State's Supplemental Nutrition Assistance Program (SNAP) agency
- □ State's Injury Prevention and Control (Public Health Injury Surveillance and
- Prevention) program
- □ Other : _____

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Additional comments:_____

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 formula targeted communities?
- 3. I understand that [XX, YY, and ZZ] are competitive communities that are targeted in your state plan for FY10, FY11, and/or FY12. Is this correct?

- \Box Yes, partly
- □ Yes, fully [SKIP TO 5]
- 🗆 No
- 4. What are the competitive targeted communities?
- 5. How did your state go about identifying these communities to be part of MIECHV?

6. Were the needs assessments used in this process?

□ Yes □ No [SKIP TO 8]

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

8.		other needs assessments did your state build on and how useful did you find those for this lar purpose?
9.	Did you	a rank communities to help identify priority communities?
		□ Yes □ No [SKIP TO 11]
10.	How	did you rank communities to identify priority communities?
11.		your initial needs assessment, has your set of targeted communities changed, whether in a plans or competitive plans?
		□ Yes □ No [SKIP TO 13]
12.	How	did they change?
13.	. Do yo	u 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. US	SE OF 1	THE NEEDS ASSESSMENT TO CHOOSE TARGET SUBGROUPS
		milar set of questions about how your state went about choosing subgroups of families your MIECHV program.
1.		tand that [XX, YY, and ZZ] are populations that are particularly targeted by your MIECHV m. 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.		s the set of targeted populations changed since you submitted your 2011 plans (and itive plan if applicable)?
	13.	Do you	anticipate this set of target groups changing in future state MIECHV plans? Yes No [SKIP TO SECTION E]
	14.	How do	you anticipate this set of target groups changing in future state MIECHV plans?
E.	СН	OICE C	OF EVIDENCE-BASED PROGRAM MODEL
	1.		stand that your program is funding program sites that are using the [XX, YY, and ZZ] I model(s). Is this correct? Yes, partly Yes, fully [SKIP TO 3] No
	2.	What m	odels are you using?
	3.	How did	d your state go about deciding which national program model(s) to use?
	4.	Were th	ne needs assessments used in making this decision?
	5.	In what	ways did the needs assessments inform your decision?
	6. \	Who else	e was actively involved in model selection? [CHECK ALL THAT APPLY] Stakeholder group National program model or developer

□ Federal government

 \Box State agency operating MIECHV program

 \Box Agency operating the local program

□ State's Title V agency

□ Title II of the Child Abuse Prevention

 \Box State child welfare agency

 \Box Single state agency for substance abuse services

□ State's Child Care and Development Fund (CCDF)

 \Box Director of the State's Head Start State Collaboration Office

 \Box State Advisory Council on Early Childhood Education and Care authorized by 642B(b) (1)(A)(i) of the Head Start Act

 \Box State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

□ State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

□ State's Domestic Violence Coalition

□ State's Mental Health agency

□ State's Public Health agency

 \Box State agency charged with crime reduction

□ State's Temporary Assistance for Needy Families (TANF) agency

 \Box State's Supplemental Nutrition Assistance Program (SNAP) agency

□ State's Injury Prevention and Control (Public Health Injury Surveillance and Prevention) program

□ Other :

Additional comments:_____

7. 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 9]

8. If so, please describe those changes.

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

□ Yes □ No [SKIP TO NEXT SECTION]

10. 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].
 - \Box State MIECHV task force
 - □ Regularly scheduled meetings between particular stakeholders. Which ones? (specify):
 - □ MOUs between state agencies
 - For what purposes? (specify): _____

G. OTHER HOME VISITING PROGRAMS OPERATING IN POTENTIAL EVALUATION COMMUNITIES

[INTERVIEWER DESCRIBES]. Your needs assessment provided information about the other home visiting programs operating in the state.

- 1. Is it your understanding that these models/programs are still operating?
 - □ 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 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.	Who advocated for	or these changes?	[CHECK ALL	THAT APPLY]
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- □ Stakeholder group
- □ National program model or developer
- □ Federal government
- \Box State agency operating MIECHV program
- \Box Agency operating the local program
- □ State's Title V agency
- □ Title II of the Child Abuse Prevention
- □ State child welfare agency
- \Box Single state agency for substance abuse services
- □ State's Child Care and Development Fund (CCDF)
- □ Director of the State's Head Start State Collaboration Office
- \Box State Advisory Council on Early Childhood Education and Care authorized by 642B(b) (1)(A)(i) of the Head Start Act

 \Box State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

□ State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

- □ State's Domestic Violence Coalition
- \Box State's Mental Health agency
- □ State's Public Health agency
- □ State agency charged with crime reduction
- □ State's Temporary Assistance for Needy Families (TANF) agency
- □ State's Supplemental Nutrition Assistance Program (SNAP) agency
- \Box State's Injury Prevention and Control (Public Health Injury Surveillance and

Prevention) program

Other : ____

- Additional comments:_____
- 4. 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]
- 5. Can you describe those changes? Why were these changes made?

6. Who advocated for these changes? [CHECK ALL THAT APPLY]

- □ Stakeholder group
- \Box National program model or developer
- □ Federal government
- \Box State agency operating MIECHV program
- \Box Agency operating the local program
- \Box State's Title V agency
- \Box Title II of the Child Abuse Prevention
- \Box State child welfare agency
- \Box Single state agency for substance abuse services
- □ State's Child Care and Development Fund (CCDF)
- \Box Director of the State's Head Start State Collaboration Office
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 \Box State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

 \Box State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

- \Box State's Domestic Violence Coalition
- □ State's Mental Health agency
- □ State's Public Health agency
- \Box State agency charged with crime reduction
- □ State's Temporary Assistance for Needy Families (TANF) agency
- □ State's Supplemental Nutrition Assistance Program (SNAP) agency
- □ State's Injury Prevention and Control (Public Health Injury Surveillance and Prevention) program
- Other :

Additional comments:

I. STATE DECISIONS TO CHANGE ELIGIBILITY CRITERIA, ADAPTATIONS, OR ENHANCEMENTS, AND STAFF TRAINING AND SUPERVISION 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? [CHECK ALL THAT APPLY]
 - □ Stakeholder group
 - \Box National program model or developer
 - □ Federal government
 - \Box State agency operating MIECHV program
 - \Box Agency operating the local program
 - □ State's Title V agency
 - \Box Title II of the Child Abuse Prevention
 - \Box State child welfare agency
 - \Box Single state agency for substance abuse services
 - □ State's Child Care and Development Fund (CCDF)
 - □ Director of the State's Head Start State Collaboration Office

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 \Box State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

 \Box State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

- □ State's Domestic Violence Coalition
- □ State's Mental Health agency
- □ State's Public Health agency
- \Box State agency charged with crime reduction
- □ State's Temporary Assistance for Needy Families (TANF) agency
- □ State's Supplemental Nutrition Assistance Program (SNAP) agency

 \square State's Injury Prevention and Control (Public Health Injury Surveillance and

Prevention) program

 \Box Other : ____

Additional comments:

4. Has the state made any decisions about the intended duration of home visiting services for families for MIECHV that narrow or broaden the service duration recommended by the national models being used in your MIECHV program?

□ Yes □ No [SKIP TO 7]

- 5. Can you describe those changes?
- 6. Who advocated for these changes relative to the national model? [CHECK ALL THAT APPLY]

□ Stakeholder group

□ National program model or developer

□ Federal government

 \Box State agency operating MIECHV program

 \Box Agency operating the local program

□ State's Title V agency

□ Title II of the Child Abuse Prevention

□ State child welfare agency

 \Box Single state agency for substance abuse services

□ State's Child Care and Development Fund (CCDF)

□ Director of the State's Head Start State Collaboration Office

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□ State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

□ State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

□ State's Domestic Violence Coalition

□ State's Mental Health agency

□ State's Public Health agency

 \Box State agency charged with crime reduction

 \Box State's Temporary Assistance for Needy Families (TANF) agency

□ State's Supplemental Nutrition Assistance Program (SNAP) agency

□ State's Injury Prevention and Control (Public Health Injury Surveillance and Prevention) program

 \Box Other :

Additional comments:_____

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

Yes
 No [SKIP TO 10]

8. Can you describe those changes?

9. Who advocated for these changes relative to the national model? [CHECK ALL THAT APPLY

□ Stakeholder group

□ National program model or developer

□ Federal government

 \Box State agency operating MIECHV program

 \Box Agency operating the local program

□ State's Title V agency

□ Title II of the Child Abuse Prevention

 \Box State child welfare agency

 $\hfill\square$ Single state agency for substance abuse services

□ State's Child Care and Development Fund (CCDF)

□ Director of the State's Head Start State Collaboration Office

 \Box State Advisory Council on Early Childhood Education and Care authorized by 642B(b) (1)(A)(i) of the Head Start Act

□ State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

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□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

□ State's Domestic Violence Coalition

□ State's Mental Health agency

□ State's Public Health agency

 \Box State agency charged with crime reduction

 \Box State's Temporary Assistance for Needy Families (TANF) agency

 \Box State's Supplemental Nutrition Assistance Program (SNAP) agency

□ State's Injury Prevention and Control (Public Health Injury Surveillance and Prevention) program

Other:

Additional comments:_____

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

□ Yes □ No [SKIP TO 13]

11. Can you describe those changes?

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

- □ Stakeholder group
- □ National program model or developer
- □ Federal government
- \Box State agency operating MIECHV program
- □ Agency operating the local program
- □ State's Title V agency
- \Box Title II of the Child Abuse Prevention
- \Box State child welfare agency
- \Box Single state agency for substance abuse services
- □ State's Child Care and Development Fund (CCDF)
- \Box Director of the State's Head Start State Collaboration Office

 \Box State Advisory Council on Early Childhood Education and Care authorized by 642B(b) (1)(A)(i) of the Head Start Act

 \Box State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

 \Box State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

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 \Box State's Mental Health agency

□ State's Public Health agency

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□ State's Temporary Assistance for Needy Families (TANF) agency

□ State's Supplemental Nutrition Assistance Program (SNAP) agency

 \Box State's Injury Prevention and Control (Public Health Injury Surveillance and

Prevention) program

□ Other : ____

Additional comments:_____

13. Does your agency provide any training or TA, including state-wide meetings or conferences, to MIECHV sites?

□ Yes □ No [SKIP TO 15]

14. What training and TA activities do you provide? Are they required?

15. Does any other agency provide any training or TA, including state-wide meetings or conferences, to
MIECHV sites?

🗆 Yes

□ No [SKIP TO 17]

16. Which agency(ies), and what training and TA activities do they provide?

- □ Stakeholder group
- □ National program model or developer

□ Federal government

 \Box State agency operating MIECHV program

 \Box Agency operating the local program

□ State's Title V agency

□ Title II of the Child Abuse Prevention

□ State child welfare agency

 \Box Single state agency for substance abuse services

□ State's Child Care and Development Fund (CCDF)

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 \Box State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

 \Box State's Domestic Violence Coalition

 \Box State's Mental Health agency

 \Box State's Public Health agency

 \Box State agency charged with crime reduction

□ State's Temporary Assistance for Needy Families (TANF) agency

□ State's Supplemental Nutrition Assistance Program (SNAP) agency

 \Box State's Injury Prevention and Control (Public Health Injury Surveillance and

Prevention) program

Other : ____

Additional comments:

- 17. Has the state asked the local MIECHV programs to make any changes to the supervision required for home visitors relative to that required by the national models?
 - 🗆 Yes

□ No [SKIP TO SECTION J]

18. Can you describe those changes?

19. Who advocated for these changes relative to the national model? [CHECK ALL THAT APPLY]

□ National program model or developer

□ Federal government

 \Box State agency operating MIECHV program

 \Box Agency operating the local program

□ State's Title V agency

□ Title II of the Child Abuse Prevention

 \Box State child welfare agency

 \Box Single state agency for substance abuse services

□ State's Child Care and Development Fund (CCDF)

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(1)(A)(i) of the Head Start Act

 \Box State's Individuals with Disabilities Education Act (IDEA) Part C and Part B Section 619 lead agency/ies

[□] Stakeholder group

□ State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

- \Box State's Domestic Violence Coalition
- \Box State's Mental Health agency

 \Box State's Public Health agency

 \Box State agency charged with crime reduction

 \Box State's Temporary Assistance for Needy Families (TANF) agency

□ State's Supplemental Nutrition Assistance Program (SNAP) agency

□ State's Injury Prevention and Control (Public Health Injury Surveillance and Prevention) program

□ Other : _____

Additional comments:_____

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 f	for collecting and	analyzing benchr	nark data.
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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
- \Box To identify needs for technical assistance to programs
- \Box 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 12]
9.	What kind of information does it collect?
10.	. What levels of staff and management receive reports from this MIS system?
	 How frequently are these reports generated and how are they used?
	🗆 No [SKIP TO 16]

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
- 16. Who was actively involved in the development of and/or ongoing changes to performance, reporting, and accountability systems? [CHECK ALL THAT APPLY]
 - □ Stakeholder group
 - □ National program model or developer
 - □ Federal government
 - \Box State agency operating MIECHV program
 - \Box Agency operating the local program
 - □ State's Title V agency
 - □ Title II of the Child Abuse Prevention
 - \Box State child welfare agency
 - \Box Single state agency for substance abuse services
 - □ State's Child Care and Development Fund (CCDF)
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□ State's Elementary and Secondary Education Act Title I or State pre-kindergarten program

□ State's Medicaid/Children's Health Insurance program (or the person responsible for Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program)

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- \Box State agency charged with crime reduction
- □ State's Temporary Assistance for Needy Families (TANF) agency
- □ State's Supplemental Nutrition Assistance Program (SNAP) agency
- □ State's Injury Prevention and Control (Public Health Injury Surveillance and
- Prevention) program
- Other : ____

Additional comments:_____

K. 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?

0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority	Priority Priori									
at All										

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?

0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					Priority
at All										

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

0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					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?

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?

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 maternal tobacco use?

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?

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?

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?											
□ 0 Not a Priority at All	□ 1	□ 2	□ 3	□ 4	□ 5 Moderate Priority	6	□ 7	8	□ 9	□ 10 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?											
□ 0 Not a Priority at All	□ 1	□ 2	□ 3	□ 4	□ 5 Moderate Priority	□ 6	□ 7	8	9	□ 10 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?											
□ 0 Not a Priority at All	□ 1	□ 2	□ 3	□ 4	□ 5 Moderate Priority	6	□ 7	8	9	□ 10 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?											
□ 0 Not a Priority	□ 1	□ 2	□ 3	□ 4	□ 5 Moderate Priority	□ 6	□ 7	□ 8	□ 9	□ 10 Highest Priority	

at All

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?

0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority					Priority					Priority
at All										

L. 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.
- 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?