**TRIBAL MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM**

**FORM 4**

**QUARTERLY PERFORMANCE REPORTING FORM**

**U.S. Department of Health and Human Services**

**Administration for Children and Families**

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is TBD. Public reporting burden for this collection of information is estimated to average 24 hours per response for Section A including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Administration for Children and Families (ACF) Reports Clearance Officer, Mary E Switzer Building, 300 C Street, SW Washington, DC 20201.

**TRIBAL HOME VISITING REPORTING SYSTEM FORM: Tribal MIECHV Quarterly Data**

Tribal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grantees are required to submit the information outlined below on a quarterly basis.

Quarterly reporting periods are defined as follows. Reports are due 30 days after the end of each reporting period:

* Q1 - October 1-December 31;
* Q2 - January 1-March 31;
* Q3 – April 1-June 30;
* Q4 – July 1-September 30

Definitions for key terms are included in Appendix A. Please carefully consult key term definitions before completing this form.

**Grant Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section A:**

**Table A.1: Program Capacity**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Column A** | **Column B** | **Column C** | **Column D** | **Column E** |
| **Number of New Households Enrolled** | **Number of Continuing Households** | **Current Caseload (A+B)** **(Auto-Calculate)** | **Maximum Service Capacity**  | **Capacity Percentage (C÷D) (Auto-Calculate)** |
|  |  |  |  |  |

**Table A.2: Family Engagement**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Column A** | **Column B** | **Column C** | **Column D** | **Column E** | **Column F** |
| **Number of Households Currently Receiving Services** | **Number of Households who Completed Program** | **Number of Households who Stopped Services Before Completion** | **Other** | **Total (A+B+C+D) (Auto-Calculate)** | **Attrition Rate****(C÷E)****(Auto-Calculate)** |
|  |  |  |  |  |  |

**Table A.3: Place-Based Services**

Add a row for each additional community served during the reporting period.

|  |  |  |
| --- | --- | --- |
| **Column A** | **Column B** | **Column C** |
| **Community** | **Zip Codes within Community**  | **Number of Households Served** |
|  |  |  |
|  |  |  |
| **Total** |  | **Sum of Column C (all rows)** |

**Table A.4.1: Staff Recruitment and Retention**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Column A** | **Column B** | **Column C** | **Column D** | **Column E** | **Column F** | **Column G** | **Column H** | **Column I** |
| **Number of New FTE MIECHV Home Visitors** | **Number of Continuing FTE MIECHV Home Visitors** | **Number of FTE MIECHV Home Visitors (A+B)** **(Auto-Calculate)** | **Number of New FTE MIECHV Supervisors**  | **Number of Continuing FTE MIECHV Supervisors** | **Number of FTE MIECHV Supervisors (D+E)** **(Auto-Calculate)** | **Number of New FTE MIECHV Other Staff** | **Number of Continuing FTE MIECHV Other Staff** | **Number of FTE MIECHV Other Staff (G+H) (Auto-Calculate)** |
|  |  |  |  |  |  |  |  |  |
| **Column J** | **Column K** | **Column L** |
| **Total Number of MIECHV Home Visitors (Headcount)** | **Total Number of MIECHV Supervisors****(Headcount)** | **Total Number of MIECHV Other Staff****(Headcount)** |
|  |  |  |

**Table A.4.2: Staff Vacancies**

|  |  |  |  |
| --- | --- | --- | --- |
| **Column A** | **Column B** | **Column C** | **Column D** |
| **Number of Vacant FTE MIECHV Home Visitors** | **Number of Vacant FTE MIECHV Supervisors**  | **Number of Vacant FTE MIECHV Other Staff** | **Number of FTE MIECHV Staff Vacancies (A+B+C) (Auto-Calculate)** |
|  |  |  |  |

**Notes**

**Appendix A: Definitions of Key Terms**

**Capacity Percentage:** Capacity percentage is a calculated indicator that results from dividing the current caseload by the maximum service capacity and multiplying by 100.

**Community:** A community is a geographically distinct area that is defined by the Tribal MIECHV grantee. Communities should be areas that hold local salience and can be defined as a neighborhood, town, city, or other geographic area. Services provided within a particular community should be distinguishable from other communities.

**Completed Program:** The number of households who completed the program refers to families who have completed the program or transitioned to another program according to home visiting model-specific definitions and criteria during the quarterly reporting period.

**Continuing Household:** A household, including a pregnant woman, female caregiver, and/or male caregiver who were signed up and actively enrolled in the home visiting program prior to the beginning of the quarterly reporting period and continues enrollment through the reporting period. The household may include multiple caregivers depending on model-specific definitions.

**Continuing FTE Home Visitor/Supervisor/Other Staff:** A full time equivalent home visitor(s)/supervisor(s)/other staff who was employed by a contracted local implementing agency in the previous quarterly reporting period. Grantees should only report the proportion of the FTE is that is supported by MIECHV grant funds.

**Current Caseload:** The number of households actively enrolled at the end of the quarterly reporting period. All members of one household represent a single caseload slot.

**Currently Receiving Services:** The number of households currently receiving services refers to households that are participating in services at the end of the quarterly reporting period.

**Maximum Service Capacity:** The highest number of households that could potentially be enrolled at the end of the quarterly reporting period if the program were operating with a full complement of hired and trained home visitors.

Note: The maximum service capacity is equivalent to the caseload of family slots indicated in your Notice of Award.

**Caseload of Family Slots**: The highest number of families (or households) that could potentially be enrolled at any given time if the program were operating with a full complement of hired and trained home visitors.  Family slots are those enrollment slots served by a trained home visitor implementing services with fidelity to the model for whom at least 25% of his/her personnel costs (salary/wages including benefits) are paid for with MIECHV funding.  All members of one family or household represent a single caseload slot.  The count of slots should be distinguished from the cumulative number of enrolled families during the grant period. It is known that the caseload of family slots may vary by federal fiscal year pending variation in available funding in each fiscal year.  Applicants should remember that inability to meet proposed caseloads may result in deobligated funds, which may impact future funding.

**New Household:** A household, including a pregnant woman, female caregiver, and/or male caregiver who signs up to participate in the home visiting program at any time during the quarterly reporting period and continues enrollment through the reporting period. The household may include multiple caregivers depending on model-specific definitions.

**New FTE Home Visitors/Supervisors/Other Staff:** A full time equivalent home visitor(s)/supervisor(s)/other staff who begins employment with a contracted local implementing agency during the quarterly reporting period. Grantees should only report the proportion of the FTE that is supported by MIECHV grant funds.

**Stopped Services before Completion:** The number of households who stopped services before completion refers to households who left the program or were lost to follow-up for any reason prior to completion.