January 2019 OMB Control No.: 0970-0521 Expiration Date: 12/31/2021

Length of time for data submission: 24 hours

MULTI-SITE IMPLEMENTATION EVALUATION OF TRIBAL HOME VISITING (MUSE) ADMINISTRATIVE DATA ELEMENTS

Public reporting burden for this collection of information is estimated to average 24 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. 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 number and expiration date for this collection are OMB #: 0970-0521, Exp: 12/31/2021. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Kate Lyon, James Bell Associates; 3033 Wilson Blvd. Suite 650, Arlington, VA 22201; MUSE.info@jbassoc.com.

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MUSE Administrative Data Elements

Thank you for taking part in the Multi-Site Implementation Evaluation of Tribal Home Visiting (MUSE). The purpose of this study is to learn about tribal home visiting programs and the experiences of families receiving home visiting services.

Tribal Home Visiting grantees collect data for various purposes including:

- Reporting participant demographics and service utilization to the Administration for Children and Families (ACF)
- Reporting performance measurement data to ACF
- Reporting data to home visiting models for quality assurance and accreditation purposes
- Conducting internal program monitoring and continuous quality improvement
- Reporting to other funders

Grantees are being asked to submit data collected by the program for the purposes outlined above to the MUSE study. While grantees submit aggregate data to ACF, in order to include these data in analyses for MUSE, grantees will submit person-level data to the MUSE study team. Administrative data elements requested include data about participating caregivers and children and the services they received.

Grantees will upload de-identified administrative data to a secure cloud-based document storage system. The data grantees provide will be kept private. Only the MUSE study team and the grantee will have access to this information. We will not report information collected in this study in a way that could identify grantees, grantee staff, or any of the participants grantees are reporting data for.

The amount of time it takes to compile and submit the existing administrative data elements varies depending on the number of caregivers who consent to participate in MUSE (including sharing administrative data) at each grantee and the number of home visits provided to participants. It also varies depending on the grantee's data system and it's reporting capabilities. For grantees using PAT and NFP data systems, the MUSE Team will be able to obtain data files directly from the model which will require only minimal involvement from the grantee. It will take grantees that are using PAT and NFP data systems substantially less time to complete this instrument. On average, it will take grantees 24 hours to develop and run reports, and compile, clean and submit these data for a single submission. Grantees will submit data semi-annually for a total of 4 times.

There is no required format or template for submitting administrative data, rather the MUSE study team will accept a range of acceptable formats. Tribal Home Visiting grantees will work with MUSE and their evaluation TA provider to determine the format for reporting that will be the least burdensome for each site.

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| DATA ELEMENT | RESPONSE CATEGORIES/DATA TYPE | |
| Administrative Data Elements Collected for Reporting Participant Demographics and Service Utilization to ACF | | |
| Sex | Male, Female | |
| Age | <17, 18-19, 20-21, 22-24, 25-29, 30-34, 35-44, 45-54, 55-64, >65 | |
| Pregnancy status at enrollment | Y/N | |
| Educational status | Student/Trainee, Not a Student/Trainee, Unknown/Did not report | |
| Employment status | Employed full time, Employed part-time, Not employed, Unknown/Did not report | |
| Household income | Form dependent - dollar amount or income ranges | |
| Child age at enrollment | Under 12 months, 12-24 months, 25-35 months, 37-60 months, 60-72 months, Unknown/did not report | |
| Housing status | Not homeless, Homeless and sharing housing, Homeless and living in an emergency or transitional shelter, Homeless with some other arrangement, Unknown/Did not report | |
| Type of health insurance | Not insured but has access to IHS, CHS, or UIHP facility; Not insured and does not have access to IHS, CHS, or UIHP facility, Medicaid or CHIP, TriCare, Private Insurance, Unknown/Did not report | |
| Race | AIAN, Asian, Black or African American, Native Hawaiian or other Pacific Islander, White, More than one race including AIAN, More than one race not including AIAN, Unknown/did not report | |
| Child race | AIAN, Asian, Black or African American, Native Hawaiian or other Pacific Islander, White, More than one race including AIAN, More than one race not including AIAN, Unknown/did not report | |
| Ethnicity | Hispanic or Latino, Not Hispanic or Latino, Unknown/did not report | |
| Marital status | Single, Legally married, Not married but living together with partner, Separated/divorced/widowed, Unknown/did not report | |

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| Educational attainment | Less than HS diploma, HS diploma/GED, Some college/training, |
| | Technical training or certification, Associates degree, Bachelor's |
| | degree or higher, Other, Unknown/did not report |
| Primary language spoken in | English, Spanish, Any Native language, Other, Unknown/did not |
| home | report |
| Secondary language spoken in | English, Spanish, Any Native language, Other, Unknown/did not |
| home | report |
| Administrative Data Elements Coll | lected for Calculating and Reporting Performance Measurement |
| Data to ACF | |
| Dates of screening for substance | DATE |
| abuse | |
| Substance abuse screening item- | Item scores |
| level responses **These data are | |
| optional. Grantees can opt out of | |
| providing these data to MUSE.** | |
| Dates of screening for parental | DATE |
| depression | |
| Depression screening total scores | Total score |
| **These data are optional. | |
| Grantees can opt out of providing | |
| these data to MUSE.** | |
| Dates of screening for unmet | DATE |
| basic needs (Family Resource | |
| Check-in) | |
| Screening for unmet basic needs | Item scores |
| (Family Resource Check-in) item | |
| level responses | |
| Dates of screening for | DATE |
| developmental delays | |
| Results of screening for | Above cutoff/below cutoff |
| developmental delay | |
| Dates of screening for intimate | DATE |
| partner violence | |
| | |

| | Length of time for data submission: 24 hours | |
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| Date of observation of caregiver- | DATE | |
| child interaction by the home | | |
| visitor | | |
| Expected visit frequency | Form dependent | |
| Dates of changes to expected | DATE | |
| visit frequency | | |
| Administrative Data Elements Col | ected for Home Visiting Model Reporting and/or Internal | |
| Performance Monitoring and Continuous Quality Improvement | | |
| Caregiver age at enrollment | NUMBER | |
| Caregiver relationship to index | Form dependent | |
| child | | |
| Index child's birth month and | MONTH YEAR | |
| year | | |
| Caregiver referral source to THV | Form dependent | |
| Date of caregiver referral to THV | DATE | |
| Date of caregiver enrollment in | DATE | |
| THV | | |
| Dates of each missed visit | DATE | |
| Reason for missed visit | Caregiver cancelled/Home visitor cancelled/Unable to confirm | |
| | visit/No-show | |
| Dates of each home visit | DATE | |
| completed | | |
| Home visitor completing each | NAME | |
| home visit | | |
| Length of home visit | MINUTES | |
| Date of caregiver exit from | DATE | |
| program | | |
| Reason for caregiver exit from | Form dependent | |
| program | | |
| Date of group events attended by | DATE | |
| caregiver | | |