

Supporting Statement A

Maternal, Infant, and Early Childhood Home Visiting Program Quarterly Data Collection

OMB Control No. 0906-0016

Revision

Terms of Clearance: None

A. Justification

1. Circumstances Making the Collection of Information Necessary

The Health Resources and Services Administration (HRSA) is requesting the Office of Management and Budget (OMB) to review and approve revisions to the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Performance Measurement Information System Quarterly Performance Report.

The MIECHV Program is designed to support voluntary, evidence-based home visiting services during pregnancy and to parents with young children up to kindergarten entry. States, certain nonprofit organizations, and tribal entities are eligible to receive funding from the MIECHV Program and have the flexibility to tailor the program to serve the specific needs of their communities.

Section 511 of the Social Security Act (42 U.S.C. 701), as amended by the Bipartisan Budget Act of 2018 requires that MIECHV awardees collect data to measure improvements for eligible families in six specified benchmark areas that encompass the major goals of the program. These areas are:

- 1) Improved maternal and newborn health
- 2) Prevention of child injuries, child abuse, neglect, and maltreatment, and reduction in emergency department visits
- 3) Improvement in school readiness and achievement
- 4) Reduction in crime and domestic violence
- 5) Improvement in family economic self-sufficiency
- 6) Improvement in the coordination and referrals for other community resources and supports

In addition to providing data on these six benchmark areas, MIECHV awardees are required to submit annual reports that summarize the demographic, service

utilization, and other administrative data related to program implementation (OMB control number 0906-0017, expiration 7/31/2024).

Awardees are required by law to demonstrate improvement in at least four of the six benchmark areas every three years. If improvement is not demonstrated at that time, awardees are required to complete a Corrective Action Plan to demonstrate how they will improve outcomes in the benchmark areas. Following an initial assessment of improvement which occurred in 2014, regular recurring assessments are required to begin following the FY 2020 reporting year and every three years thereafter.

In order to continuously monitor, provide grant oversight, quality improvement guidance, and technical assistance to MIECHV grantees, HRSA is seeking to renew existing collection of several categories of information on a quarterly basis: Program Capacity, Place-Based Services, Service Utilization, Staffing and Benchmark Performance Data.

2. Purpose and Use of Information Collection

HRSA is seeking renewal and revision for one form (two sections) that will be used to collect data from MIECHV awardees:

Section A - Service Utilization Data (Attachment A): This section is made up of four categories of data – program capacity, place-based services, family engagement, and staffing. This form is used by MIECHV awardees to collect data in order to determine the caseload capacity awardees are achieving, where services are being delivered, the retention and attrition of enrolled families, and information on program staff on a quarterly basis. The information is also used to provide quality improvement guidance and technical assistance to awardees and help inform the development of early childhood systems at the national, state, and local level.

HRSA is seeking to revise reporting instructions and definitions of key terms and to expand the use of Form 4 in order to collect distinct quarterly performance data related to the use of ARP funds. This revision is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, information can be collected in a timely manner.

Collection of quarterly Service Utilization data represents an administrative requirement by HRSA for the ongoing and continuous monitoring and oversight of grant activities. These data assist HRSA in demonstrating awardee compliance with several program policies, including the maintenance of service caseloads and targets for service capacity.

In general, revisions being requested to this form are for the purposes of clarifying and streamlining reporting requirements. These revisions will better align the

intended and actual uses of these data for program monitoring and oversight

purposes.

Specific proposed revisions and corresponding rationales to Section A are as follows (additional details can be found on the revised form submitted as Attachment A to this package):

- 1) Form 4, reporting guidance: Revise reporting instructions to reflect updated reporting requirements
- 2) Revise the key definitions for Table A.1 in Definitions of Key Terms section to update adult participant gender language.
- 3) Add key definitions for Table A.2 in Definitions of Key Terms section to clarify definitions for reporting categories.
- 4) Revise the due date from 30 to 45 days following the end of each reporting period. HRSA has previously granted administrative extensions on quarterly reporting due dates, allowing for a 15 day extension. This revision will provide continuity in data submission timeframes and will allow awardees to report information in line with previously granted administrative extensions.

Section B - Benchmark Performance Data (Attachment A): This section captures data from MIECHV awardees who have a corrective action plan related to a formal assessment of improvement as established by the statute. Awardees will be required to report quarterly on the benchmark areas where they did not demonstrate improvement and which are the foci of their Corrective Action Plan. HRSA currently estimates approximately ten awardees may not demonstrate following the next required assessment, which will occur in October 2023 (as defined in statute).

Specific proposed revisions and corresponding rationales to Section B are as follows (additional detail can be found on the revised form submitted as Attachment A to this package):

- 1) Section B will be updated to reflect the current benchmark constructs. This revision will align Section B with MIECHV annual reporting requirements to allow for more frequent collection of this information among awardees that do not demonstrate improvement, as outlined in statute.

The objective for this data collection activity is to provide HRSA with timely updates to service utilization and performance data variables that have the potential to change on a frequent basis. HRSA uses this information to assist in grants monitoring activities and to target technical assistance resources to underperforming awardees. In addition, this information allows HRSA to verify that the communities identified as most in need of home visiting services by awardees in their statutorily required needs assessments are receiving MIECHV funded services.

3. Use of Improved Information Technology and Burden Reduction

Improved information technology is utilized where appropriate. Awardees collect information from home visiting participants using their own established methods. Awardees aggregate and report this information to HRSA using the Home Visiting Information System (HVIS), a Bureau Reporting System within HRSA's Electronic Handbooks grants management application. The system is an electronic reporting tool used by MIECHV Program awardees for annual and quarterly performance reporting, and allows for the appropriate storage, extraction, and records management of performance data by federal staff.

4. Efforts to Identify Duplication and Use of Similar Information

The information collected through this request is not available from another source. Only MIECHV awardees can supply the requested information.

This information collection request seeks to revise and extend the current MIECHV Program Performance Measurement Information System.

5. Impact on Small Businesses or Other Small Entities

Information will be collected from individuals by staff at Local Implementing Agencies. Local Implementing Agencies are contracted by the state or territorial awardee to provide home visiting services and may be small businesses. Because information collection may involve small businesses, the information being requested has been held to the absolute minimum necessary for the intended use of the data. This revision streamlines requested data to better align the intended and actual uses of these data for program monitoring and oversight purposes

6. Consequences of Collecting the Information Less Frequently

The information collected through this request is reported on a quarterly basis. The intended use of this information is to assist HRSA in monitoring and oversight activities and to target technical assistance resources more efficiently. This information is also likely to change more frequently than the measures MIECHV awardees are required to report on an annual basis. As such, quarterly reporting is required in order for HRSA to have the most accurate information possible when assessing awardee performance and making decisions about program policy and resources.

There are no legal obstacles to reduce the burden.

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

The request fully complies with the regulation.

8. Comments in Response to the Federal Register Notice/Outside Consultation

Section 8A:

A 60-day Federal Register Notice was published in the *Federal Register*, 86 Fed. Reg. 35809, (July 7, 2021) (see Attachment B). HRSA received two public comments providing feedback. The feedback was reviewed and taken into consideration. Attachment C provides a summary of the public comments and HRSA's responses. Attachment D provides all public comments received.

Public comment expressed support for updates to language in the definitions of key terms for Table A.1. Additionally, public comment cited concern regarding the added definitions on reporting categories for zip codes and counties served as outlined in the definitions of key terms for Table A.2 and expressing potential increased administrative burden for quarterly reporting of zip code and county information in alignment with the added definitions. A public comment also expressed concern with the expansion of Form 4 to collect quarterly data related to the American Rescue Plan Act, citing the potential burden increase.

HRSA acknowledges the concerns expressed in the public comments and discussed concerns with multiple HRSA personnel. With regards to the feedback provided on zip code and county definitions outlined in Table A.2, these added definitions do not constitute a change in reporting guidance but rather align with information included in previous HRSA guidance on zip code and county reporting. Technical assistance will be provided to clarify guidance and to support awardees in operationalizing data collection and reporting requirements. With regards to American Rescue Plan Act quarterly reporting, HRSA will also provide technical assistance to support awardees in meeting data collection and reporting requirements.

Section 8B:

HRSA has formal and informal mechanism for checking in with internal and external stakeholders regarding data reporting needs and challenges. Based on our understanding of those relationships and the minor updates to this form, HRSA did not engage in outside consultation for this revision/extension request.

9. Explanation of any Payment/Gift to Respondents

Respondents will not receive any payments or gifts.

10. Assurance of Confidentiality Provided to Respondents

No personally identifiable information (PII) is being collected through this information collection request. All data will be reported in aggregate by the grantee. This project does not require IRB approval.

11. Justification for Sensitive Questions

No questions of a sensitive nature will be asked of respondents.

12. Estimates of Annualized Hour and Cost Burden

12A. Estimated Annualized Burden Hours

| Type of Respondent | Form Name | No. of Respondents | No. Responses per Respondent | Total Responses | Average Burden per Response (in hours) | Total Burden Hours |
|--------------------------------|--|---------------------------|-------------------------------------|------------------------|---|---------------------------|
| MIECHV Program Awardees | Form 4: Section A – Quarterly Performance Report | 56 | 8 | 448 | 24 | 10,752 |
| MIECHV Program Awardees | Form 4: Section B – Quarterly Benchmark Performance Measures | 10 ¹ | 4 | 40 | 200 | 8,000 |
| Total | | 56 | | 488 | | 18,752 |

12B.

Estimated Annualized Burden Costs

| Type of Respondent | Total Burden Hours | Hourly Wage Rate | Total Respondent Costs |
|--------------------------------|---------------------------|-------------------------|-------------------------------|
| Home Visiting Program Grantees | 18,752 | \$33.46 | \$627,442 |

The estimated total cost to respondents is approximately \$627,442. This annualized cost to respondents is based on the average wage of social and community service

¹ The 10 responses for Section B are a sub-set of 56 total awardees funded through the MIECHV Program.

managers from the 2020 Bureau of Labor Statistics report on Wage Estimates (Bureau of Labor Statistics, 2020²).

13. Estimates of other Total Annual Cost Burden to Respondents or Recordkeepers/Capital Costs

Other than their time, there is no cost to home visiting program participants. MIECHV Program awardees devote time and resources to the development and/or update of management information systems used to collect, aggregate, and report performance data in order to align with the information requested under this request. HRSA will provide technical assistance to awardees in order to promote efficiencies in this development work. Additionally, HRSA has exempted awardee costs related to these updates from the programmatic ceiling for infrastructure costs. Awardees may use grant funds to pay for these developments/updates.

14. Annualized Cost to Federal Government

Costs to the federal government fall into four categories:

- Cost of developing and maintaining the reporting system
- Cost of federal staff time for project oversight and development
- Cost of federal staff time for technical assistance and review and approval of quarterly performance reports
- Cost of contractual support for data cleaning and analysis

| Type of Cost | Description of Services | Annual Cost |
|---|--|-------------|
| HVIS Development – Contracted | Development and maintenance of the electronic reporting system for quarterly data collection | \$150,000 |
| Government Social Science Analyst (10%) | Project management and oversight, consultation, and development | \$ 10,333 |
| Government Project Officers (5%) | 10 regional project officers provide TA to awardees and review and approve quarterly reports | \$58,562 |
| Data Cleaning and Analysis – Contracted | Data aggregation and analysis | \$65,750 |
| Total Estimated Annual Cost | | \$284,645 |

² Wages for MIECHV data collection and entry staff are based on the 2020 Bureau of Labor Statistics data for the median hourly wage for Social and Community Service Managers. Retrieved from <https://www.bls.gov/ooh/management/social-and-community-service-managers.htm>.

HRSA estimates the average annual cost for the federal government will include personnel costs for project and contract oversight, instrument design, and analysis.

This will include federal program analyst at Grade 13 Step 1 (\$49.68 hourly rate; Office of Personnel Management, 2021³) for 208 hours.

Government costs will also include personnel costs for providing technical assistance to awardees and time for federal project officers to review and approval annual reports. These tasks will be completed by 10 federal project officers at Grade 13 Step 5 (\$56.31 hourly rate; Office of Personnel Management, 2021⁴) for 104 hours each, or a total annual level of effort of 1,040 hours.

The total annual cost to the Federal Government for this requirement is estimated at \$284,645.

15. Explanation for Program Changes or Adjustments

This is a revised information collection request. Explanation for revisions are provided in Section 2.

16. Plans for Tabulation, Publication, and Project Time Schedule

Aggregation and descriptive statistics on quarterly data will be conducted in order to summarize the performance of both awardees, as well as the program as a whole. This summary information may be made public through data briefs, fact sheets, professional presentations, and/or published manuscripts.

For awardees who do not demonstrate improvement during the initial assessment and are required to submit more frequent benchmark performance data, time series comparisons of performance indicators and systems outcome benchmark performance data will be conducted. Performance values will be compared to prior quarter values in order to assess progress for demonstrating improvement in each benchmark area. Where appropriate and applicable, performance data will be compared to state or national representative data sources. Summary benchmark performance data may be made public through data briefs, fact sheets, professional presentations, and/or published manuscripts.

| Activity | Time Schedule |
|--|------------------------------------|
| Distribute data collection forms and instructions to MIECHV awardees | Immediately following OMB approval |
| Quarterly Report due (January-March 2022) | May15, 2022 |
| Quarterly Report due (April-June 2022) | August 15, 2022 |

³ Office of Personnel Management (2021). SALARY TABLE 2021-DCB. Retrieved from https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/21Tables/pdf/DCB_h.pdf

⁴ Ibid

| | |
|--|-------------------|
| Quarterly Report due (July-September 2022) | November 14, 2022 |
| Quarterly Report due (October-December 2022) | February 14, 2023 |
| Quarterly reporting will continue on an annual schedule throughout the OMB approved clearance timeframe. | |

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

The OMB number and expiration date will be displayed on every page of every form/instrument.

18. Exceptions to Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification.

List of Attachments

Attachment A. MIECHV Quarterly Performance Report
Attachment B. 60-day Federal Register Notice
Attachment C. HRSA Response to Comments Received
Attachment D. Individual Comments Received in Response to 60-Day Federal Register Notice