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

**FORM 2**

**PERFORMANCE AND SYSTEMS OUTCOME MEASURES**

**Public Burden Statement:** The purpose of this collection is to collect demographic, performance, and system outcomes measures from Maternal, Infant, and Early Childhood Home Visiting (MIECHV) awardees. HRSA will use the proposed information to demonstrate program accountability and annually monitor and provide oversight to MIECHV Program awardees. The information will also be 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. 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 information collection is 0906-0017 and it is valid until XX/XX/202X. This information collection is required to obtain or retain a benefit (42 U.S.C. 701). Data will be private to the extent permitted by the law. Public reporting burden for this collection of information is estimated to average 440 hours per response, 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 HRSA Information Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or paperwork@hrsa.gov.  Please see <https://www.hrsa.gov/about/508-resources> for the HRSA digital accessibility statement.

# MEASURE 1

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: PRETERM BIRTH** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of infants (among mothers who enrolled in home visiting prenatally before 37 weeks) who are born preterm following program enrollment** |
| **4. SPECIFICATION****NUMERATOR: Number of live births (index child or subsequent children among mothers who enrolled in home visiting prenatally before 37 weeks) born before 37 completed weeks of gestation and after enrollment****DENOMINATOR: Number of live births after enrollment who were born to mothers enrolled in home visiting prenatally before 37 weeks** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 2

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: BREASTFEEDING** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of infants (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age** |
| **4. SPECIFICATION****NUMERATOR: Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age****DENOMINATOR: Number of infants aged 6-12 months (index child among mothers who enrolled in home visiting prenatally) enrolled in home visiting for at least 6 months** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 3

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: DEPRESSION SCREENING** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting who are screened for depression using a validated tool within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally)** |
| **4. SPECIFICATION****NUMERATOR: For those not enrolled prenatally, number of primary caregivers enrolled in home visiting****who are screened for depression within the first 3 months since enrollment; for those enrolled prenatally, the number of primary caregivers screened for depression within 3 months of delivery****DENOMINATOR: For those not enrolled prenatally, the number of primary caregivers enrolled in home visiting for at least 3 months; for those enrolled prenatally, the number of primary caregivers enrolled in****home visiting for at least three months post delivery** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8. Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 4

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: WELL CHILD VISIT** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of children enrolled in home visiting who received the last recommended visit based on the American Academy of Pediatrics (AAP) schedule** |
| **4. SPECIFICATION****NUMERATOR: Number of children (index child) enrolled in home visiting who received the last recommended well child visit based on the AAP schedule****DENOMINATOR: Number of children (index child) enrolled in home visiting** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if a home visit occurred but the home visitor did not collect the data. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 5

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: POSTPARTUM CARE** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery** |
| **4. SPECIFICATION****NUMERATOR: Number of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks (56 days) of delivery****DENOMINATOR: Number of mothers who enrolled in home visiting prenatally or within 30 days after delivery and remained enrolled for at least 8 weeks (56 days) after delivery** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 6

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: TOBACCO CESSATION REFERRALS** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment.** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment****DENOMINATOR: Number of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were enrolled for at least 3 months** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown, including if there is no documentation of whether the primary caregiver used tobacco or cigarettes at enrollment since inclusion in the denominator cannot be determined if the screening result is unknown. When there is no documentation of whether a referral was provided, but all other data elements are known and inclusion in the denominator can be determined,****then the primary caregiver should be included in the denominator (if eligible), but not in the numerator.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **All cases of missing data should be excluded from the measure calculation.** |  |
| **7. NOTES** |

\* Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 7

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| **1.****BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS****CONSTRUCT: SAFE SLEEP** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of infants enrolled in home visiting that are always placed to sleep on their backs, without bed-sharing and without soft bedding** |
| **4. SPECIFICATION****NUMERATOR: Number of infants (index child aged less than 1 year) enrolled in home visiting whose****primary caregiver reports that they are always placed to sleep on their backs, without bed-sharing and without soft bedding****DENOMINATOR: Number of infants (index child) enrolled in home visiting who were aged less than 1 year during the reporting period** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the

missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 8

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| **1.****BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS****CONSTRUCT: CHILD INJURY** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Rate of injury-related visits to the Emergency Department (ED) during the reporting period among children enrolled in home visiting** |
| **4. SPECIFICATION****NUMERATOR: Number of parent-reported nonfatal injury-related visits to the ED during the reporting period among children (index child) enrolled in home visiting****DENOMINATOR: Number of children (index child) enrolled in home visiting** |
| **5.****VALUE FOR REPORTING PERIOD** (rate)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 9

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| **1.****BENCHMARK AREA: CHILD INJURIES, ABUSE, NEGLECT, AND MALTREATMENT AND EMERGENCY DEPARTMENT VISITS****CONSTRUCT: CHILD MALTREATMENT** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of children enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period** |
| **4. SPECIFICATION****NUMERATOR: Number of children (index child) enrolled in home visiting with at least 1 investigated case of maltreatment following enrollment within the reporting period****DENOMINATOR: Number of children (index child) enrolled in home visiting** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 10

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| **1.****BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT****CONSTRUCT: PARENT-CHILD INTERACTION** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction by the home visitor using a validated tool****DENOMINATOR: Number of primary caregivers enrolled in home visiting with children reaching the target age range** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether the index child received an observation of caregiver-child interaction by the home visitor using a validated tool, but all other data elements are known, then the index child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8.****Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 11

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| **1.****BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT****CONSTRUCT: EARLY LANGUAGE AND LITERACY ACTIVITIES** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of children enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day** |
| **4. SPECIFICATION****NUMERATOR: Number of children (index child) enrolled in home visiting with a family member who reported that during a typical week s/he read, told stories, and/or sang songs with their child daily, every day****DENOMINATOR: Number of children (index child) enrolled in home visiting** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 12

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| **1.****BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT****CONSTRUCT: DEVELOPMENTAL SCREENING** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent- completed tool** |
| **4. SPECIFICATION****NUMERATOR: Number of children (index child) enrolled in home visiting with at least one screening within the AAP-defined age groups during the reporting period****DENOMINATOR: Number of children (index child) enrolled in home visiting reaching the specified time frame during the reporting period** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the child should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**8.**

**Measurement Tool Utilized**

Indicate the validated measurement tool(s) utilized to address this measure

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 13

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| **1.****BENCHMARK AREA: SCHOOL READINESS AND ACHIEVEMENT****CONSTRUCT: BEHAVIORAL CONCERN INQUIRIES** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of postnatal home visits where primary caregivers were asked if they have any concerns regarding their child’s development, behavior, or learning** |
| **4. SPECIFICATION****NUMERATOR: Number of postnatal home visits where primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child’s development, behavior, or learning****DENOMINATOR: Total number of postnatal home visits during the reporting period** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. If a home visit occurred, but there is no documentation of whether the primary caregiver was asked about behavioral concerns, then the home visit should be included in the denominator (if eligible – i.e., postnatal visit), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 14

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| **1.****BENCHMARK AREA: CRIME OR DOMESTIC VIOLENCE****CONSTRUCT: INTIMATE PARTNER VIOLENCE SCREENING** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting who are screened for intimate partner violence (IPV) within 6 months of enrollment using a validated tool** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who are screened for IPV using a validated tool within 6 months of enrollment****DENOMINATOR: Number of primary caregivers enrolled in home visiting for at least 6 months** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool (including if a screening did not occur because the caregiver was male and they only have validated tools for use among female caregivers), but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8.****Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 15

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| **1.****BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY****CONSTRUCT: PRIMARY CAREGIVER EDUCATION** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers who enrolled in home visiting without a high school degree or equivalent who subsequently enrolled in or maintained continuous enrollment in middle school or high school, or completed high school or equivalent during their participation in home visiting** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers who enrolled in or maintained continuous enrollment in middle school or high school, or completed a high school degree or equivalent after enrollment in home visiting (and met the conditions specified in the denominator)****DENOMINATOR: Number of primary caregivers without a high school degree or equivalent at enrollment** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 16

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| **1.****BENCHMARK AREA: FAMILY ECONOMIC SELF-SUFFICIENCY****CONSTRUCT: CONTINUITY OF INSURANCE COVERAGE** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting for at least 6 months who had continuous health insurance coverage for the most recent 6 consecutive months** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who reported having continuous health insurance coverage for the most recent 6 consecutive months at the most recent data collection time point in the reporting period****DENOMINATOR: Number of primary caregivers enrolled in home visiting for at least 6 months** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |
| **7. NOTES** |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 17

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| **1.****BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS****CONSTRUCT: COMPLETED DEPRESSION REFERRALS** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers referred to services for a positive screen for depression who receive one or more service contacts** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who received recommended services for depression (and met the conditions specified in the denominator)****DENOMINATOR: Number of primary caregivers enrolled in home visiting who had a positive screen for depression within 3 months of enrollment (for those not enrolled prenatally) or within 3 months of delivery (for those enrolled prenatally) and were referred for services** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. Data are also considered missing if there is no documentation of whether a referral was provided. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8.****Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 18

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| **1.****BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS****CONSTRUCT: COMPLETED DEVELOPMENTAL REFERRALS** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner** |
| **4. SPECIFICATION****NUMERATOR: Number of children enrolled in home visiting who a) received individualized developmental support from a home visitor; b) were referred to early intervention services and receive an evaluation within****45 days; OR c) were referred to other community services who received services within 30 days (and met the condition specified in the denominator)****DENOMINATOR: Number of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool)** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8.****Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# MEASURE 19

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| **1.****BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS****CONSTRUCT: INTIMATE PARTNER VIOLENCE REFERRALS** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) who receive referral information to IPV resources** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who received referral information to IPV resources (and met the conditions specified in the denominator)****DENOMINATOR: Number of primary caregivers enrolled in home visiting with positive screens for IPV (measured using a validated tool) within 6 months of enrollment** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a referral was provided, but all other data elements are available and inclusion in the denominator can be determined, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8.****Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# OPTIONAL MEASURE 1

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| **1.****BENCHMARK AREA: MATERNAL AND NEWBORN HEALTH****CONSTRUCT: SUBSTANCE USE SCREENING** |
| **2.****TYPE OF MEASURE****Performance Indicator** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers enrolled in home visiting who are screened for both unhealthy alcohol use and drug use using a validated tool within 6 months of enrollment** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who were screened for both unhealthy alcohol use and drug use using validated tool(s) within 6 months of enrollment****DENOMINATOR: Number of primary caregivers enrolled in home visiting for at least 6 months** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. When there is no documentation of whether a screening occurred using a validated tool, but all other data elements are known, then the primary caregiver should be included in the denominator (if eligible), but not in the numerator. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8. Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

# OPTIONAL MEASURE 2

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| **1.****BENCHMARK AREA: COORDINATION AND REFERRALS FOR OTHER COMMUNITY RESOURCES AND SUPPORTS****CONSTRUCT: COMPLETED SUBSTANCE USE REFERRALS** |
| **2.****TYPE OF MEASURE****Systems Outcome** |
| **3.****PERFORMANCE MEASURE****Percent of primary caregivers referred to services for a positive screen for substance use who receive one or more service contacts** |
| **4. SPECIFICATION****NUMERATOR: Number of primary caregivers enrolled in home visiting who received recommended services for substance use (and met the conditions specified in the denominator)****DENOMINATOR: Number of primary caregivers enrolled in home visiting who had a positive screen for unhealthy alcohol use and/or drug use (measured using a validated tool) within 6 months of enrollment and were referred for services** |
| **5.****VALUE FOR REPORTING PERIOD** (percentage)**Value:** | Numerator: |
| Denominator: |
| **6.****MISSING DATA\*****6.a. Definition****Data are considered missing if one or more data elements needed to determine inclusion in the numerator or denominator are unknown. Data are also considered missing if there is no documentation of whether a referral was provided. All cases of missing data should be excluded from the measure calculation.** | **6.b. Value – Enter the number of cases missing from measure calculation:** |

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| **7. NOTES** |
| **8.****Measurement Tool Utilized**Indicate the validated measurement tool(s) utilized to address this measure |

**\*** Note: When the percent of missing data is ≥10%, a table note should be provided that addresses the reason for the missing data, and if possible, plans to reduce the amount of missing data in future reporting.

**DEFINITIONS OF KEY TERMS**

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| **Construct Number** | **Construct** | **Key Term Definitions** |
| **1.** | **Preterm Birth** | **Preterm Birth:** a birth before 37 completed weeks of gestation (defined as up to 36 weeks and 6 days).1 |
| **2.** | **Breastfeeding** | **Breastfeeding:** in addition to breast milk fed directly from the mother to the infant, breastfeeding also includes feeding the infant pumped or expressed breast milk. |
| **3.** | **Depression Screening** | **Depression:** aligned with each grantee’s validated depression screening tool’s definition of depression. |
| **4.** | **Well-Child Visit** | **AAP schedule for Well-Child Visits:** Updated AAP 2017 Recommendations for Pediatric Preventive Health Care https:/[/www.aap.org/en-us/Documents/periodicity\_schedule.pdf](http://www.aap.org/en-us/Documents/periodicity_schedule.pdf) |
| **5.** | **Postpartum Care** | **Postpartum Care Visit:** A postpartum visit is a visit between the woman and her health care provider to assess the mother’s current physical health, including the status of pregnancy-related conditions like gestational diabetes, screen for postpartum depression, provide counseling on infant care and family planning as well as screening and referrals for the management of chronic conditions. Additionally, a provider may use this opportunity to conduct a breast examand discuss breastfeeding. The American College of Obstetricians and Gynecologists recommends that mothers receive a postpartum care visit within 6 weeks after delivery. 2 |
| **6.** | **Tobacco Cessation Referrals** | **Tobacco Use:** combustibles (cigarettes, cigars, pipes, hookahs, bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and ENDS. |
| **7.** | **Safe Sleep** | No definitions required |
| **8.** | **Child Injury** | **Injury-related Emergency Department Visit**: Injuries refer to the following causes of mechanisms of injury: motor vehicle, suffocation, drowning, poisoning, fire/burns, falls, sportsand recreation, and intentional injuries, such as child maltreatment.3 |
| **9.** | **Child Maltreatment** | **Investigated Case:** all children with an allegation of maltreatment that were screened-in forinvestigation or assessment and further received an investigation. 4 A screened-in report is one that is accepted for investigation or assessment based on the state’s screen-in criteria. 5 |
| **10.** | **Parent-Child Interaction** | No definitions required |
| **11.** | **Early Language****and Literacy Activities** | No definitions required |
| **12.** | **Developmental Screening** | **Developmental Delay:** delays in any or all areas including cognitive, social, language, sensory, |

1 Behrman R, Stith Butler A. eds. Preterm Birth: Causes, Consequences, and Prevention. Washington, DC: The National Academies Press, 2007.

2 Optimizing postpartum care. Committee Opinion No. 666. American College of Obstetricians and Gynecologists. Obstet Gynecol 2016;127:e187–92. Retrieved from https://[www.acog.org/-](http://www.acog.org/-)

/media/Committee-Opinions/Committee-on-Obstetric-Practice/co666.pdf?dmc=1&ts=20180221T1421452301

3 Centers for Disease Control and Prevention. National Action Plan for Child Injury Prevention. 2012. Retrieved from <http://www.cdc.gov/safechild/NAP/background.html#unint>

4 Child Welfare Information Gateway. Child Maltreatment 2015: Summary of Key Findings. Retrieved from <https://www.childwelfare.gov/pubs/factsheets/canstats/>

5 Child Welfare Information Gateway. Screening and Intake. Retrieved from <https://www.childwelfare.gov/topics/responding/iia/screening/>

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|  |  | and emotional development.6 |
| **13.** | **Behavioral Concern Inquiries** | No definitions required |
| **14.** | **IPV Screening** | **Intimate Partner Violence:** physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by thefollowing: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, familiarity and knowledge about each other’s lives. 7 |
| **15.** | **Primary Caregiver Education** | No definitions required |
| **16.** | **Continuity of Insurance Coverage** | **Continuous Health Insurance Coverage:** having health insurance coverage without any lapses. |
| **17.** | **Completed Depression Referrals** | **Recommended services:** specific techniques and intervention models delivered in the context of client characteristics, culture, and preferences that have shown to have positive effects onoutcomes through rigorous evaluations and have demonstrated to achieve positive outcomes for the client.8 |
| **18.** | **Completed Developmental****Referrals** | **Developmental Delay:** delays in any or all areas including cognitive, social, language, sensory, and emotional development.6 |
| **19.** | **IPV Referrals** | **Intimate Partner Violence:** physical violence, sexual violence, stalking and psychological aggression (including coercive acts) by a current or former intimate partner. An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexualbehavior, identity as a couple, familiarity and knowledge about each other’s lives. 7 |
| **Optional Measure 1** | **Substance Use Screenings** | **Unhealthy Alcohol Use and Drug Use:** Definitions of unhealthy alcohol and drug use should align with each awardees’s validated substance use screening tool’s definition. |
| **Optional Measure 2** | **Completed Substance Use Referrals** | **Recommended services:** Specific techniques and intervention models delivered in the context of client characteristics, culture, and preferences that have shown to have positive effects on outcomes through rigorous evaluations and have demonstrated to achieve positive outcomes for the client. 8 |

6 U.S. National Library of Medicine, National Institutes of Health. Psychological Index Terms via Unified Medical Language System, 2015. Retrieved from [http://ghr.nlm.nih.gov/glossary=developmentaldelay](http://ghr.nlm.nih.gov/glossary%3Ddevelopmentaldelay)

7 Centers for Disease Control and Prevention. Injury Prevention and Control: Division of Violence Prevention, 2015. Retrieved from <http://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html>

8 Home Visiting Collaborative Improvement and Innovation Network.