Healthy Start
Virtual Grantees' Meeting

Deep Dive into Healthy Start Data Topics for Data Leads & Evaluators

Lina Barret, DHSPS
Ada Determan, DHSPS

June 25, 2020

HEALTHY
start
TA & SUPPORT CENTER

NICHQ
National Institute for
Children's Health Quality

Agenda

Housekeeping	Colleen Bernard, NICHQ
Deep Dive into Healthy Start Data Topics for Data Leads & Evaluators	Lina Barret, DHSPS Ada Determan, DHSPS
Q&A	All
Closing	Colleen Bernard, NICHQ

Meeting Logistics

Please note the following:

- This session is being recorded, and will be archived for future viewing.

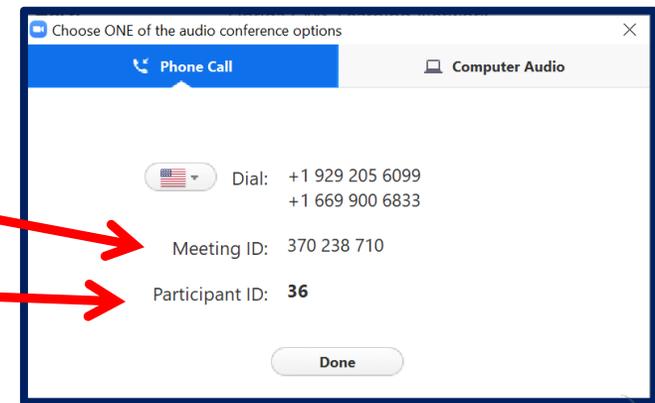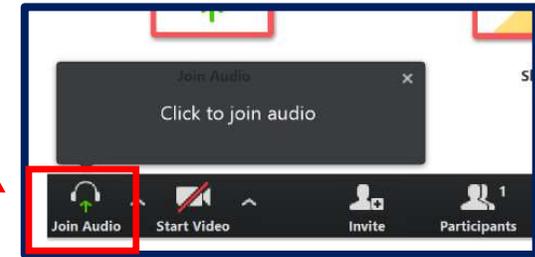- All participants are muted upon entry. We ask that you remain muted to limit background noise.

- Members are encouraged to participate in the discussion by typing your comment/asking questions using the chat box.

Connecting to the Audio Conference

- Join Zoom Meeting by **clicking Zoom Meeting link** & launching the Zoom application

- An audio conference box will appear
  - If you do not see the box click the **'Join Audio' button**

- From the audio conference box: Select to **"Phone Call"** or **"Computer Audio"**

- If using the phone:
  - dial the number next to "Dial"
  - You will be prompted to enter the **"Meeting ID"**
  - Then you will be prompted to enter the **"Participant ID"**

Join Zoom Meeting:
https://zoom.us/j/237206404

Click to join audio

Join Audio | Start Video | Invite | Participants

Choose ONE of the audio conference options

Phone Call | Computer Audio

Dial: +1 929 205 6099
+1 669 900 6833

Meeting ID: 370 238 710

Participant ID: **36**

Done

Ways to Participate: Chat

After you click the 'Chat' button, a sidebar will appear where you can chat to all participants

At the bottom of the Zoom window, you will see a 'Chat' button

Chat here to everyone!

#HealthyStartStrong

- Spread the word about #HealthyStartStrong on social media

- Throughout the meeting, post about what you're learning/enjoying about the meeting

- Include the hashtag #HealthyStartStrong and be sure to tag @NICHQ

We Are #HealthyStartStrong

Healthy Start Virtual Grantees' Meeting, June 2020

HEALTHY start
TA & SUPPORT CENTER

NICHQ
National Institute for Children's Health Quality

Lina Barret, MCHB, DHSPS

Ada Determan, MCHB DHSPS

Evaluators/Data Leads Session: Deep Dive into HS Data Topics

Healthy Start Virtual Grantees' Meeting
June 25, 2020

Ada Determan, PhD, MPH & Lina Barrett, MPH
Division of Healthy Start and Perinatal Services
Maternal and Child Health Bureau (MCHB)

Vision: Healthy Communities, Healthy People

Agenda

- Data Collection Forms
  - Updates to Forms
  - Next Steps
- Monthly Aggregate Template
  - Revised Calculations
  - Updated Definitions
- Performance Report
  - Reporting periods
  - Announcements

One does not simply

forget
how important data collection is

Data Collection Forms

New Updates and Modifications

Rationale for Updating the Data Collection Forms

Done in response to grantee feedback/questions; aim to clear up confusion about some items

Aid implementation

Streamline data collection and reduce burden to grantees and program participants

Strengthen data quality

OH NO NOT THIS AGAIN

* No cause for alarm - Changes are minor, but should be significantly helpful *

HRSA Maternal & Child Health

Data Collection Forms – Summary of Key Changes

- Added missing response options (e.g., "Don't Know")

- Updated questions (e.g., added options for male participants)

  - No need to guess how to best respond

- Clarified instructions & embedded additional details

- Improved formatting & corrected typos

- Updated Participant Type: definitions and requirements

- Added specifications to Unique Client ID format

HRSA
Maternal & Child Health

Changes to Formatting

Improved Appearance
- Removed blue background of "cover sheets"; replaced with General Information numbering that starts with G1
- REMOVED UNNECESSARY OCCURRENCES OF ALL CAPS USAGE

Improved Navigation
- Ensured that questions/responses did not cross over separate pages
- Revised tables to have "numbering" systems
- Added page numbers

Improved Quality
- Added units (e.g., months) to some fill-in-the-blank responses to ensure consistency in responses
- Added more cross-checks across document
- Reviewed for consistency in language across forms

→ *Cleaner, more user-friendly Data Collection Forms*

Overview: Participant Requirements per the HS NOFO

Program Participant:

- An individual having *direct contact with HS staff or subcontractors* and *receiving HS case management/care coordination services* on an *ongoing systematic basis* to improve perinatal and infant health.

→ **Enrollment Requirements**

- Specifically, program participants are *pregnant women and women of reproductive age, infants, and children up to 18 months.* Participants also include *fathers/male partners who are affiliated with women and/or infants who receive services from HS.*

→ **Participant Type**

- Your HS program must serve, per calendar year, at least *300 pregnant women; 300 infants/children up to 18 months and preconception/interconception women;* and *100 fathers/male partners.* You must case manage your program participants, and your program must be able to collect data on all HS program participants.

→ **Data Count Requirements**

HRSA
Maternal & Child Health

Participant Type: Definitions

Primary Participant

- **Enrolled woman**
  - A woman who is <u>enrolled</u> in preconception, prenatal, postpartum, or parenting/interconception services

- **Enrolled father/male partner**
  - Must be <u>enrolled</u> in case management/care coordination services to be designated a primary participant
    - Does not include men who solely attend the occasional education program
  - Must be linked to an enrolled woman or enrolled child

- **Other adult with primary custody of/responsibility for enrolled child**
  - <u>Not enrolled</u>; not counted toward 700 participant requirement, but is linked to an enrolled child (e.g., grandparent, foster parent)

Enrolled Child

- An enrolled infant or child up to 18 months of age

New: Changes to Participant Type

What didn't make the cut?

- **Accompanying Adult (AA)** – The Primary Participant's spouse or partner, and/or the enrolled child's coparent, who will regularly accompany the PP for services

Why?

- AA did not meet NOFO participant requirements and increased burden & complexity
  1. Participant Type: AA is not mentioned in NOFO
  2. Enrollment Requirements: AA is not receiving services
  3. Data Count Requirements: Not a required data category & does not count toward 700 participants; added collection/reporting burden without contributing much relevant information

➢ *HS has removed the AA participant type from the forms; grantees will not need to collect data or report on AAs to HRSA*

Primary Participants Differ by Form Type

Background Form

- a woman (reproductive age female) who is enrolled for preconception, prenatal, postpartum, or parenting/interconception health services
- an enrolled father/male partner
- other unenrolled adult (if applicable) who has primary responsibility for/custody of an enrolled child

Prenatal Form — *Must be a pregnant woman*

- a pregnant woman who is enrolled for prenatal services
- the Post-Pregnancy Follow-Up Section is completed once the woman gives birth or the pregnancy otherwise ends

Parent/Child Form — *Must have an enrolled child*

- an enrolled woman (reproductive age female) with an enrolled child who is receiving postpartum or parenting/interconception health services
- an enrolled father with an enrolled child
- or other unenrolled adult who has primary responsibility for/custody of an enrolled child

New: Other Linked Primary Participant (PP)

- Not a new participant type
- A family unit can have more than one Primary Participant (e.g., mom & partner)
  - An Enrolled Child is not an "Other Linked PP"
- Enables associated participants to be linked in the data set
- Background Form & Prenatal Form allow 2 "Other Linked PPs"
- The Parent/Child Form allows 3 "Other Linked PPs"

Name of Primary Participant: _____ DOB:_____
Name of Enrolled Child: _____ DOB:_____
Name of Other Linked Primary Participant(s):_____ DOB:_____
_____ DOB:_____
_____ DOB:_____

Update to Unique Client ID Format

New UID Algorithm:

OrgID + **Participant Code** + **Client Unique Identifier**

3-digit   2-letter   Any mix of letters & numbers – **no special characters**
Minimum length = <u>4</u>   Maximum length = <u>45</u>

Ex.   <u>0</u> <u>0</u> 3   +   PP   +   12A345B

↳ **UID = 003PP12A345B**

Update Rules by Form Type

- **"Update"** means that a <u>new form is completed in its entirety</u> (all applicable parts) by reviewing old responses with the client and revising those that have changed

	Background Form	Prenatal Form	Parent/Child Form
Phase Change	- woman enters or exits prenatal phase - already enrolled child (EC) turns 6 mos	- pregnancy ends	- enrolled infant turns 6 mos
Other Update	- PP continues enrollment after EC exits - annual reporting occurs with no phase change on PP's part - major life event - significant change in health status - added/removed 'other linked primary participant' - upon exit from HS program	- added/removed 'other linked primary participant' - upon exit from HS program before the end of the pregnancy	- mother stops breastfeeding - mother had a postpartum visit since initial completion - annual reporting occurs with no phase change on PP's part - major life event - significant change in health status - added/removed 'other linked primary participant' - upon exit from HS program

New: Additions to Response Options

Added "Don't Know" and "Declined to Answer" options, where appropriate

- Ex. Household Income

[Select one.]
- ☐ $0 to $16,000
- ☐ $16,001 to $20,000
- ☐ $20,001 to $24,000
- ☐ $24,001 to $28,000
- ☐ $28,001 to $32,000
- ☐ $32,001 to $40,000
- ☐ $40,001 to $48,000
- ☐ $48,001 to $57,000
- ☐ $57,001 to $60,000
- ☐ $60,001 to $73,000
- ☐ $73,001 to $85,000
- ☐ $85,001 or more
- ☐ Don't know
- ☐ Declined to answer

Added "Select all that apply" options, where appropriate

- Ex. Phase of the Reproductive Life Cycle

G6. WHAT PHASE OF THE REPRODUCTIVE CYCLE WAS THE PRIMARY PARTICIPANT IN WHEN HE/SHE FIRST ENROLLED IN HS? (SELECT ALL THAT APPLY)

Preconception
- ☐ Woman (no prior pregnancies)
- ☐ Man (no prior children)

Prenatal
- ☐ Currently pregnant
- ☐ Partner is currently pregnant

Postpartum
- ☐ Has a live infant less than 6 months old
- ☐ Partner has a live infant less than 6 months old
- ☐ Had a pregnancy loss less than 6 months ago
- ☐ Partner had a pregnancy loss less than 6 months ago

Parenting/Interconception
- ☐ Has child(ren) 6-18 months enrolled in HS
- ☐ Has children, but they are not enrolled in or are not eligible for HS services
- ☐ A woman with no live children but who had a pregnancy loss 6 or more months ago
- ☐ A man with no live children but whose partner had a pregnancy loss 6 or more months ago
- ☐ An unenrolled adult who has primary responsibility for/custody of an enrolled child

Maternal & Child Health

New: Corrected Minor Typos

- Corrected typos on forms to facilitate the interview & reduce reliance on the FAQs for anomalies
  - Ex. Prenatal Form – Current smoking question

11. How many cigarettes are you smoking now on an average day? A pack has 20 cigarettes.

☐ 41 cigarettes or more
☐ 21 to 40 cigarettes
☐ 11 to 20 cigarettes
☐ 6 to 10 cigarettes
☐ 1 to 5 cigarettes

☐ Less than 1 cigarette
☐ I don't smoke
☐ Don't know
☐ Declined to answer

Updated Questions: Background Form/Reproductive Cycle

- Background Info Form – Q G6 – Added options to make it easier to select best response for either female or male primary participant

G6. WHAT PHASE OF THE REPRODUCTIVE CYCLE WAS THE PRIMARY PARTICIPANT IN WHEN HE/SHE FIRST ENROLLED IN HS? (SELECT ALL THAT APPLY)

Preconception
- ☐ Woman (no prior pregnancies)
- ☐ Man (no prior children)

Prenatal
- ☐ Currently pregnant
- ☐ Partner is currently pregnant

Postpartum
- ☐ Has a live infant less than 6 months old
- ☐ Partner has a live infant less than 6 months old
- ☐ Had a pregnancy loss less than 6 months ago
- ☐ Partner had a pregnancy loss less than 6 months ago

Parenting/Interconception
- ☐ Has child(ren) 6-18 months enrolled in HS
- ☐ Has children, but they are not enrolled in or are not eligible for HS services
- ☐ A woman with no live children but who had a pregnancy loss 6 or more months ago
- ☐ A man with no live children but whose partner had a pregnancy loss 6 or more months ago
- ☐ An unenrolled adult who has primary responsibility for/custody of an enrolled child

Maternal & Child Health

New: Added elements to follow logic of questions

- Previous Prenatal Form had only one line to indicate a linked newborn to the mother
- Added spaces to indicate for births to multiples

2) [Staff: If this pregnancy resulted in a live baby(ies) who is now enrolled in HS, indicate the Unique ID#(s) of the enrolled child (EC)/children (as applicable):]

[Enter as One Number: Grantee Org Code + EC + Client's Unique ID (e.g., 123EC45678)]

a. UID for 1st EC: _____

b. UID for 2nd EC: _____

c. UID for 3rd EC: _____

d. UID for 4th EC: _____

Next steps

- Updated forms available next week
  - Will be accessible via the HS Epic Website
- Spanish forms
  - New forms will be available soon
- Additional resources coming soon
  - Forms: Implementation Guide (if needed)
  - HSMED2: XML Schema, Data Dictionary, Trainings, T/A
- HSMED2 launch (start entering client-level data)
  - Planned for mid-November 2020
- Vendor meeting announcement
  - Scheduled for July 9th
- Questions?
  - For general questions: HealthyStartData@hrsa.gov
  - For questions specific to your site or circumstance: Contact your Project Officer first

Monthly Aggregate Template

Updates and Resources

Monthly Aggregate Template – Guiding Reasons

Respond to feedback

Align Measures

Clarify definitions

Strengthen data quality

Monthly Aggregate Template – Key Changes

Revised Instructions

- Total Count Calculations
- Race & Ethnicity Calculations
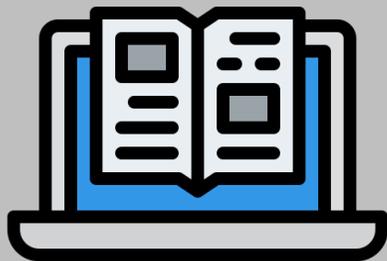
Data Dictionary

- Data Element Definitions
- Numerators & Denominators

Maternal & Child Health

Revised Instructions – Total Count Calculations

Reporting Month	Reporting Year	4b. TOTAL number of unduplicated participants served to date, CY2020 (Note: This is a cumulative count; each participant should be counted only once)					
		Pregnant Women	Infants 0-11 months	Children 12-17 months	Non-pregnant Women	Men	Total
1	2020	30	10	15	30	15	100
2	2020	62	15	20	35	18	150

Revised Instructions – Race & Ethnicity Calculations

Reporting Month	Reporting Year	5. Race - TOTAL number of unduplicated participants served to date, CY2020 (Note: This is a cumulative count; each participant should be counted only once)											
		5f. Multi-racial						5g. Other or Unknown					
		Pregnant Women	Infants 0-11 months	Children 12-17 months	Non-pregnant Women	Men	Total	Pregnant Women	Infants 0-11 months	Children 12-17 months	Non-pregnant Women	Men	Total
1	2020	2	3	2	5	5	17	1	2	0	2	2	7
2	2020	5	4	3	10	10	32	3	2	0	2	4	11

Data Dictionary – Trimester Prenatal Care

3a. [Of those enrolled prior to their 2nd trimester of pregnancy:] Number of pregnant participants who reported receiving prenatal care beginning in their first trimester

In the reporting month…

- **Numerator:** # of pregnant participants <u>who reported</u> receiving prenatal care beginning in their first trimester

- **Denominator:** # of pregnant participants who were enrolled prenatally, prior to their 2nd trimester of pregnancy

3. Behaviors				
[To include the behaviors reported during the month; does not mean that the event necessarily took place during the reporting month.]				
ose enrolled prior to trimester of pregnancy:] of pregnant participants rted receiving prenatal nning in their first trimester	3b. [Of those enrolled prenatally or within 30 days after delivery:] Number of participants with a postpartum visit 4-6 weeks after delivery	3c. [Of the prenatal women enrolled at least 90 days before delivery:] Number of prenatal participants who abstained from using any tobacco products during the last (final) 3 months of pregnancy	3d. Number of new participants enrolled with health insurance	3e. [Of the HS infants participants aged less than 12 months whose parent was enrolled prenatally or at the time of delivery:] Number of HS infant participants who were ever breastfed of fed pumped breast milk

Maternal & Child Health

Data Dictionary – Postpartum Visit

3b. [Of those enrolled prenatally or within 30 days after delivery:] Number of participants with a postpartum visit 4-6 weeks after delivery

In the reporting month…

- **Numerator:** # of participants who reported receiving a postpartum visit 4-6 weeks after delivery

- **Denominator:** # of participants enrolled prenatally or within 30 days after delivery

3. Behaviors				
[To include the behaviors reported during the month; does not mean that the event necessarily took place during the reporting month.]				
...ose enrolled prior to ...trimester of pregnancy:] ...of pregnant participants ...rted receiving prenatal ...nning in their first trimester	3b. [Of those enrolled prenatally or within 30 days after delivery:] Number of participants with a postpartum visit 4-6 weeks after delivery	3c. [Of the prenatal women enrolled at least 90 days before delivery:] Number of prenatal participants who abstained from using any tobacco products during the last (final) 3 months of pregnancy	3d. Number of new participants enrolled with health insurance	3e. [Of the HS infants participants aged less than 12 months whose parent was enrolled prenatally or at the time of delivery:] Number of HS infant participants who were ever breastfed of fed pumped breast milk

Maternal & Child Health

Data Dictionary – Tobacco Abstinence

3c. [Of the prenatal women enrolled at least 90 days before delivery:] Number of prenatal participants who abstained from using any tobacco products during the last (final) 3 months of pregnancy

In the reporting month…

- **Numerator:** # of prenatal participants <u>who reported</u> abstaining from using any tobacco products during the last (final) 3 months of pregnancy

- **Denominator:** # of prenatal women who were enrolled at least 90 days before delivery

3. Behaviors				
[To include the behaviors reported during the month; does not mean that the event necessarily took place during the reporting month.]				
ose enrolled prior to trimester of pregnancy:] of pregnant participants rted receiving prenatal nning in their first trimester	3b. [Of those enrolled prenatally or within 30 days after delivery:] Number of participants with a postpartum visit 4-6 weeks after delivery	3c. [Of the prenatal women enrolled at least 90 days before delivery:] Number of prenatal participants who abstained from using any tobacco products during the last (final) 3 months of pregnancy	3d. Number of new participants enrolled with health insurance	3e. [Of the HS infants participants aged less than 12 months whose parent was enrolled prenatally or at the time of delivery:] Number of HS infant participants who were ever breastfed of fed pumped breast milk

Data Dictionary – Breastfeeding Initiation

In the reporting month...

- **Numerator:** # of infant participants whose parent (or caregiver) reported they were ever breastfed or fed pumped breastmilk

- **Denominator:** # of infant participants aged less than 12 months whose parent (or caregiver) was enrolled prenatally or at the time of delivery

3e. [Of the HS infants participants aged less than 12 months whose parent was enrolled prenatally or at the time of delivery:] Number of HS infant participants who were ever breastfed of fed pumped breast milk

3. Behaviors [To include the behaviors reported during the month; does not mean that the event necessarily took place during the reporting month.]				
3a. [Of those enrolled prior to their 2nd trimester of pregnancy:] Number of pregnant participants who reported receiving prenatal care beginning in their first trimester	3b. [Of those enrolled prenatally or within 30 days after delivery:] Number of participants with a postpartum visit 4-6 weeks after delivery	3c. [Of the prenatal women enrolled at least 90 days before delivery:] Number of prenatal participants who abstained from using any tobacco products during the last (final) 3 months of pregnancy	3d. Number of new participants enrolled with health insurance	3e. [Of the HS infants part aged less than 12 months parent was enrolled pren at the time of delivery:] Number of HS infant participants who were ever breastfed of fed pumped breast milk

Data Dictionary – Phase Change Rules

- **Pregnant Women** – in order to count the number of pregnant women served in a reporting year (Calendar Year):
  - <u>Becomes pregnant</u> – remove from the "Non-pregnant" category and place into the "Pregnant" category. Must not be removed from the pregnant category for the remainder of the reporting year, for any reason.

  - <u>Is no longer pregnant</u> – remains in the "Pregnant" category and must not be removed for the remainder of the reporting year, for any reason.

Data Dictionary – Category Definitions

- ## Definitions –
  - Men - males who are enrolled in Healthy Start and receiving case management/care coordination services

  - Infants – age range from birth through the last day of the 11th month

  - Children – age range from the 1st day of the 12th month through the last day of the 17th month

Monthly Aggregate Template - FAQs

Q: In January, can I "roll-over" active participants enrolled in the previous reporting year? Do I include them in January's Total Number Served To-Date?

A: No. Participants enrolled during a different reporting year should be included in the Total Number Served To-Date count when they receive services in the current reporting year.

Q: Should I exclude multiples from the aggregate template counts (i.e., count a multiple birth as a singleton)?

A: No. While multiples may be at higher risk for outcomes such as preterm birth, in order to have an accurate picture of the Healthy Start population's experiences we want to include all births. Please include multiples.

Monthly Aggregate Template – Final Notes

- Reporting Due Date
  - Remains the 10th of every month

- Revised Template and Data Dictionary
  - Email to Project Directors and post to the HS Epic website

Who to contact about questions?

- For general questions – HealthyStartData@hrsa.gov

- For questions specific to your site (or circumstance) – Contact your Project Officer

Non-Competing Continuation Performance Report

Reporting Dates and Announcements

Non-Competing Performance Report

HRSA
Health Resources & Services Administration

Year of Performance Report Completion	Required Forms	Reporting Period
Year 2020	**Financial Forms (1-4)**	**Budget Period** 04-01-2019 - 03-31-2020 (Past Year Expenditures)
	Financial Form 5 Number of Individuals Served (Unduplicated)	**Pro-rated Calendar Year:** 04-01-2019 - 12-31-2019
	Financial Form 6 Abstract	**Budget Period:** 04-01-2019 - 03-31-2020
	Financial Form 7- Section 5 Demographic Characteristics of Project Participants	**Pro-rated Calendar Year:** 04-01-2019 - 12-31-2019
	Project Performance Measures, Tiers 1-4 Women's/Maternal Health (WMH), Perinatal Infant Health (PIH), Child Health (CH), Life Course (LC)	**Pro-rated Calendar Year:** Indicators 04-01-2019 - 12-31-2019
	HS Site Form – Current service sites	Current Service Sites

Complete All Tiers – Including Tier 4

NCC Performance Report – Announcements

- **Error in the DGIS data entry screens:**
  - **Perinatal Infant Health – 1 (Safe Sleep), Tier 4**
    - Numerator and denominator should reflect the number of infants placed to sleep following safe sleep practices.

Non-Competing Performance Report

HRSA
Health Resources & Services Administration

Year of Performance Report Completion	Required Forms	Reporting Period
Year 2 - 2021 **Year 3 - 2022** **Year 4 - 2023**	Financial Forms (1-4)	<u>Budget Year:</u> **YEAR 2:** 04-01-2020 - 03-31-2021 (Past Year Expenditures) **YEAR 3:** 04-01-2021 - 03-31-2022 (Past Year Expenditures) **YEAR 4:** 04-01-2022 - 03-31-2023 (Past Year Expenditures)
	Financial Form 5 Number of Individuals Served (Unduplicated)	<u>Calendar Year:</u> **YEAR 2:** 01-01-2020 - 12-31-2020 **YEAR 3:** 01-01-2021 - 12-31-2021 **YEAR 4:** 01-01-2022 - 12-31-2022
	Financial Form 6 Abstract	<u>Budget Year:</u> **YEAR 2:** 04-01-2020 - 03-31-2021 **YEAR 3:** 04-01-2021 - 03-31-2022 **YEAR 4:** 04-01-2022 - 03-31-2023
	Financial Form 7- Section 5 Demographic Characteristics of Project Participants	<u>Calendar Year:</u> **YEAR 2:** 01-01-2020 - 12-31-2020 **YEAR 3:** 01-01-2021 - 12-31-2021 **YEAR 4:** 01-01-2022 - 12-31-2022
	Project Performance Measures, Tiers 1-4 Women's/Maternal Health (WMH), Perinatal Infant Health (PIH), Child Health (CH), Life Course (LC)	<u>Calendar Year: Indicators</u> **YEAR 2:** 01-01-2020 - 12-31-2020 **YEAR 3:** 01-01-2021 - 12-31-2021 **YEAR 4:** 01-01-2022 - 12-31-2022
	HS Site Form – Current service sites	Current Service Sites

Q & A

Connect with HRSA

Learn more about our agency at:

www.HRSA.gov

✉ [Sign up for the HRSA eNews](#)

FOLLOW US: