

<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>1. Prenatal Care</b>
<b>Performance Measure</b>	Percent of pregnant women who received prenatal care
<b>Operational Definition</b>	Target Population: Women who are pregnant when they enroll
	Numerator: Women who were pregnant at enrollment who received their first prenatal care visit before the end of the second trimester
	Denominator: Women who were pregnant at enrollment
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase the number of pregnant women who receive prenatal care
	Calculation: The number of women who were pregnant at enrollment who received their first prenatal care visit before the end of the second trimester divided by the number of women who were pregnant at enrollment in year 2 compared to the number of women who were pregnant at enrollment who received their first prenatal care visit before the end of the second trimester divided by the number of women who were pregnant at enrollment in year 1
<b>*Cohort comparison:</b>	
<b>Data Source</b>	HV program records, pregnant woman-self report
<b>Measurement Tool</b>	PAT: LSP #17 Prenatal care scores do not capture 2 <sup>nd</sup> trimester threshold, therefore we will ask PAT to use the HV record, "When did you receive prenatal care?" EHS: PIR #C15a,b Trimester of pregnancy in which the pregnant women served were enrolled or use internal program data HFA: HV record "When did you receive prenatal care?"
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question or administer the tool and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected at enrollment within first 2 home visits and every 6 months of program enrollment
	Analysis: Every 6 months for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	PAT data collection is not specific to the second trimester.

\*Cohort

Year One = May 1, 2012 to April 31, 2013

Year Two = May 1, 2013 to April 31, 2014

<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>2. Parental use of alcohol, tobacco, or illicit drugs</b>
<b>Performance Measure</b>	Percent of smokers at intake who decrease smoking by 1 year post enrollment.
<b>Operational Definition</b>	Target Population: Enrolled pregnant women and mothers who report current use of tobacco at enrollment
	Numerator: Number of enrolled smokers at intake, who reported decreased smoking by one year post enrollment
	Denominator: Number of enrolled smokers at intake who remain in the program for at least one year
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase percent of smokers at intake who reported smoking fewer cigarettes by one year post enrollment  Calculation: Number of smokers at intake who reported reduced smoking by one year post enrollment divided by the number of participants who reported smoking at intake
<b>Individual</b>	
<b>Data Source</b>	Collected during home visit using the 3 client/caregiver questions from PRAMS, "Prenatal Use of Tobacco"
<b>Measurement Tool</b>	HFA & EHS: PRAMS: "Prenatal Use of Tobacco"  "In the 3 months before you got pregnant, how many cigarettes did you smoke on an average day?" "In the last 3 months of your pregnancy how many cigarettes did you smoke on an average day?" "How many cigarettes do you smoke on an average day now?" 41 cigarettes or more 21 to 40 cigarettes 11 to 20 cigarettes 6 to 10 cigarettes Less than 2 cigarette I don't smoke now  PAT: LSP#25: Do you currently smoke or use other tobacco products? How much do you use per day?
<b>Reliability/Validity</b>	Pregnancy Risk Assessment Monitoring System; A Survey for Healthier Babies in New Jersey (cited 2011 May). Available from: <a href="http://www.nj.gov/health/fhs/documents/methods_summary.pdf">http://www.nj.gov/health/fhs/documents/methods_summary.pdf</a>

	LSP: #25 – N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will administer the questionnaire and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected at intake and one year post enrollment
	Analysis: Every 6 months for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>3. Preconception Care</b>
<b>Performance Measure</b>	Percent of enrolled post partum women who receive a post partum examination within the first three months following enrollment
<b>Operational Definition</b>	Target Population: Post partum women enrolled in program
	Numerator: Number of post partum women who reported a post partum examination
	Denominator: Total number of enrolled post partum women who remain in the program for 3 months
<b>Definition of improvement and calculation</b>  <b>Cohort</b>	Definition of improvement: Increase or maintain the percent of enrolled post partum women that received a post partum exam within the first three months following enrollment in year 1 as compared to the percent of enrolled post partum women that received a post partum exam within the first three months following enrollment in year 2 Calculation: Number of post partum women who report a post partum examination divided by the total number of post partum women in year 2 compared to the number of post partum women who report a post partum examination divided by the total number of post partum women in year 1.
<b>Data Source</b>	Collected during home visit interview
<b>Measurement Tool</b>	Question: "When was your last post-partum examination?"
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected or within the first 3 months following enrollment
	Analysis: Every 6 months for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	All models will use same measurement tool

<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>4. Inter Birth Intervals</b>
<b>Performance Measure</b>	Percent of enrolled mothers and pregnant women who received birth spacing education within 6 months of enrollment
<b>Operational Definition</b>	Target Population: Enrolled mothers and pregnant women
	Numerator: Total number of enrolled mothers and pregnant women who received birth spacing education within six months of enrollment
	Denominator: Total number of mothers and pregnant women enrolled during the program year for at least 6 months
<b>Definition of improvement and calculation</b>  <b>Cohort</b>	<p>Definition of improvement: Increase or maintain the percent of mothers and pregnant women who enrolled during year 2 who received birth spacing education within six months of enrollment as compared to the percent of mothers and pregnant women who enrolled during year 1 who received birth spacing education within six months of enrollment</p> <p>Calculation: Total number of mothers and pregnant women who enrolled during year 2 who received birth spacing education within six months of enrollment divided by the total number of mothers and pregnant women who enrolled during year 2 compared to total number of mothers and pregnant women who enrolled during year 1 who received birth spacing education within six months of enrollment divided by the total number of mothers and pregnant women who enrolled during year 1.</p>
<b>Data Source</b>	Collected during home visit interview
<b>Measurement Tool</b>	HFA and EHS: Question: "Did the mother or pregnant woman receive birth spacing education?" PAT: LSP #1 " Do you have information about the different ways to prevent pregnancies?"
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected at six months post enrollment
	Analysis: Every 6 months for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>5. Screening for maternal depressive symptoms</b>
<b>Performance Measure</b>	Percent of mothers who screened for depression by 6 months post enrollment
<b>Operational Definition</b>	Target Population: Enrolled mothers in the program
	Numerator: Number of enrolled mothers who were screened for depressive symptoms using the Edinburgh Postnatal Depression Scale between enrollment and 6 months post enrollment
	Denominator: Total number of enrolled mothers for at least 6 months
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the percent of enrolled mothers who are screened for depression between enrollment and 6 months post enrollment in year 2, as compared to the percent of enrolled mothers who are screened for depression between enrollment and 6 months post enrollment in year 1.
<b>Cohort</b>	Calculation: Number of enrolled mothers who were screened for depression between enrollment and 6 months post enrollment in year 2 divided by the total number of enrolled mothers in year 2 compared to the number of enrolled mothers who were screened for depression between enrollment and 6 months post enrollment in year 1 divided by the total number of enrolled mothers
<b>Data Source</b>	Collected during home visit interview
<b>Measurement Tool</b>	Edinburgh Postnatal Depression Scale Question: "Was the EPDS administered?"
<b>Reliability/Validity</b>	The EPDS has been found to have good reliability and validity, with a sensitivity of 86%, a specificity of 78% and a split-half reliability of .99 with a standardized $\alpha$ coefficient of .87 <sup>1</sup>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected by six months post enrollment
	Analysis: Every 6 months for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	

<sup>1</sup> The origins and development of the Edinburgh Postnatal Depression Scale. The Royal College of Psychiatrists. [http://www.rcpsych.ac.uk/files/samplechapter/81\\_1.pdf](http://www.rcpsych.ac.uk/files/samplechapter/81_1.pdf). Accessed July 11, 2011.

<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>6. Breastfeeding</b>
<b>Performance Measure</b>	The number of weeks that index women who enrolled prenatally spent breastfeeding up until the child is 6 months of age.
<b>Operational Definition</b>	Target Population: Index women who enrolled prenatally
	Numerator: Total number of weeks that index women who enrolled prenatally spent breastfeeding
	Denominator: Number of index women who enrolled prenatally
<b>Definition of improvement and calculation</b>  <b>Cohort</b>	<p>Definition of improvement: Increase in the average number of weeks that a mother who enrolled prenatally in year 2 spent breastfeeding compared to the average number of weeks that a mother who enrolled prenatally in year 1 spent breastfeeding.</p> <p>Calculation: Total number of weeks that mothers enrolled prenatally in year 2 spent breastfeeding divided by the total number of mothers who enrolled prenatally in year 2 compared to the total number of weeks that mothers enrolled prenatally in year 1 spent breastfeeding divided by the total number of mothers who enrolled prenatally in year 1.</p>
<b>Data Source</b>	Collected during home visit interview
<b>Measurement Tool</b>	HFA and EHS: PRAMS Breastfeeding questionnaire : “ How many weeks or months did you breastfeed or pump milk to feed your baby?” PAT: LSP #43 “How long did you breast feed your baby?”
<b>Reliability/Validity</b>	Pregnancy Risk Assessment Monitoring System; A Survey for Healthier Babies in New Jersey (cited 2011 May). Available from: <a href="http://www.nj.gov/health/fhs/documents/methods_summary.pdf">http://www.nj.gov/health/fhs/documents/methods_summary.pdf</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will administer the questionnaire and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected quarterly for CQI
	Analysis: Annually

<b>Comments/Anticipated Challenges</b>	
<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>7. Well Child Visits</b>
<b>Performance Measure</b>	Percent of index children who received the recommended schedule of immunization according to the AAP/CHDP well child schedule at birth, 1, 2, 4 and 6 months of age.
<b>Operational Definition</b>	Target Population: Index children enrolled for at least 6 months
	Numerator: Number of index children enrolled for at least 6 months who received the recommended schedule of immunizations
	Denominator: Total number of index children in program who have been enrolled for at least 6 months.
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain percent of index children who have been enrolled for at least 6 months who have received all recommended schedule of well child visits according to AAP/CHDP schedule in year 2 as compared to index children who have been enrolled for at least 6 months who have received all recommended well child visits according to AAP/CHDP schedule in year 1.
<b>Cohort</b>	Calculation: Number of index children enrolled for at least 6 months who received the recommended schedule of well child visits divided by the total number of index children in the program who have been enrolled for at least 6 months in year 2 compared to number of index children enrolled for at least 6 months who received the recommended schedule of well child visits divided by the total number of index children in the program who have been enrolled for at least 6 months in year 1.
<b>Data Source</b>	Program records and self report
<b>Measurement Tool</b>	PAT: LSP#20 "How often did you take your child for a well-child doctor's visit?" /LSP score of 5 on #20 EHS: Internal program data HFA: Program records and self report for immunization and well child visits
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask for well child visit/immunization report/record and the data entry personnel will enter the response into the database.
	Data collection schedule: collected at 6 months enrollment
	Analysis: Every 6 months for CQI and reported annually

<b>Comments/Anticipated Challenges</b>	
<b>Benchmark 1: Improved Maternal and Newborn Health</b>	
<b>Construct</b>	<b>8. Maternal and Child Health Insurance Status</b>
<b>Performance Measure</b>	Percent of mothers and index children with health insurance by 6 months post enrollment
<b>Operational Definition</b>	Target Population: Enrolled mothers and children
	Numerator: Number of mothers with health insurance plus the number of index children with health insurance by 6 months post enrollment
	Denominator: Total number of enrolled mothers and children who remain enrolled for at least 6 months
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the percentage of enrolled mothers and index children with health insurance by 6 months post enrollment in year 2 compared to the percentage of enrolled mothers and index children with health insurance by 6 months post enrollment in year 1.
<b>Cohort</b>	Calculation: The number of enrolled mothers and index children with insurance by 6 months post enrollment in year 2 divided by the total number of enrolled mothers and index children in year 2 compared to the enrolled mothers and index children with health insurance by 6 months post enrollment in year 1 divided by the total number of enrolled mothers and index children in year 1.
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	Question: "Do you currently have health insurance?" "Does your child currently have health insurance?"
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the questions and the data entry personnel will enter the response into the database.
	Data collection schedule: Quarterly
	Analysis: Every 6 months for CQI and reported annually

<b>Comments/Anticipated Challenges</b>	
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<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>1. Visits for children to the ED from all causes</b>
<b>Performance Measure</b>	Rate of emergency department visits per index child in the program enrolled for at least one year
<b>Operational Definition</b>	Target: All index children enrolled in the program
	Numerator : Total number of emergency department visits by index children in the program
	Denominator: Total number of index children in the program
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease the rate of emergency department visits per index child in the program in year 2 compared to emergency department visits per index child in the program in year 1
<b>Cohort</b>	Calculation: Number of ED visits by all children in the program in year 2 divided by the total number of children in the program in year 2 compared to number of ED visits by all children in the program in year 1 divided by the total number of children in the program in year 1.
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	HV will ask question, "How many times has your child been to the emergency dept. for any reason?"
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will ask the question and data entry personnel will enter data in database
	Data collection schedule: Quarterly
	Analysis: Annually for reporting

<b>Comments/Anticipated Challenges</b>	In addition to reporting this as a whole, it will also be reported by the child's age when the incident occurred (0-12 months, 13-36 months, and 37-60 months).
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<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>2. Visits of mothers to the ED from all causes</b>
<b>Performance Measure</b>	Rate of emergency department visits per mother in the program enrolled for at least one year
<b>Operational Definition</b>	Target: Mothers enrolled in the program
	Numerator : Total number of emergency department visits by enrolled mothers in the program
	Denominator: Total number of enrolled mothers in the program
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease the rate of emergency department visits by enrolled mothers in the program in year 2 compared to emergency department visits by enrolled mothers in the program in year 1
<b>Cohort</b>	Calculation: Number of emergency department visits by enrolled mothers in the program in year 2 divided by the total number of enrolled mothers in the program in year 2 compared to the number of emergency department visits by enrolled mothers in the program in year 1 divided by the total number of enrolled mothers in the program in year 1.
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	Home visitor will ask the question, "How many times have you visited the emergency department for any reason?"
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will ask the question and data entry personnel will enter the data
	Data collection schedule: Quarterly for CQI

	Analysis: Annually reported
<b>Comments/Anticipated Challenges</b>	
<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>3. Information provided or training of participants on prevention of child injuries including safe sleep, shaken baby, TBI, child passenger safety, poisonings, fire safety, water safety, playground safety</b>
<b>Performance Measure</b>	Percentage of enrolled families who received information or training on the prevention of child injuries during the cohort year
<b>Operational Definition</b>	Target population: Enrolled families
	Numerator : Number of enrolled families who have received information or training on the prevention of child injuries
	Denominator: Total number of enrolled families
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the percentage of enrolled families who enrolled during year 2 who received information or training on the prevention of child injuries compared to the percentage of enrolled families who enrolled during year 1 who received information or training on the prevention of child injuries .
<b>Cohort</b>	Calculation: Number of enrolled families who have received information or training on the prevention of child injuries divided by the total number of enrolled families in year 2 compared to the number of enrolled families who have received information or training on the prevention of child injuries divided by the total number of enrolled families in year 1
<b>Data Source</b>	Program administrative records
<b>Measurement Tool</b>	HFA Program’s policies and procedures: P & P contain procedures for providing information and training for the prevention of child injuries. Early Head Start - Internal program data PAT -Personal Visit Record
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will administer the policies and procedures and will record completion of information

	and training.
	Data collection schedule: Quarterly for CQI
	Analysis: Annually reported
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>4. Child injuries requiring medical treatment</b>
<b>Performance Measure</b>	Rate of injuries index children receive that require medical treatment (ambulatory care, ED visits, and hospitalization, injury or ingestions)
<b>Operational Definition</b>	Target population: Index children enrolled in the program
	Numerator : Total number of injuries index children receive requiring medical treatment
	Denominator: Total number of index children in the program
<b>Definition of improvement and calculation</b>	Definition of improvement: Decreased rate in the injuries index children receive requiring medical treatment in year 2 compared to the injuries index children receive requiring medical treatment in year 1
<b>Cohort</b>	Calculation: Number of injuries index children receive requiring medical treatment in year 2 divided by the total number of index children in the program in year 2 compared to the number of injuries index children receive requiring medical treatment in year 1 divided by the total number of index children in the program in year 1
<b>Data Source</b>	Adult enrolled index participant self report, collected by home visitor
<b>Measurement Tool</b>	HFA and EHS: Self report question administered by home visitor, “In the past 3 months, how many times did your child receive medical treatment for an injury? “ (also inquire reason for the visit, kind of injury, type of treatment) PAT: score of 1 or 2 on LSP #8-Safety “Has your child ever had an accident that caused injury?” “Have you ever taken your child to the ER for accidental injury?” “Has he/she been hospitalized?” “Sustain permanent damage?”
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will administer the questionnaire to the adult enrolled index participant
	Data collection schedule: Quarterly for CQI

	Analysis: Annually reported
<b>Comments/Anticipated Challenges</b>	In addition to reporting this as a whole, it will also be reported by the child's age when the incident occurred (0-12 months, 13-36 months, and 37-60 months)  Will require raw data from PAT

<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>5. Reported suspected maltreatment (allegations)</b>
<b>Performance Measure</b>	Percent of suspected maltreatment cases among index children in the program enrolled during the cohort year
<b>Operational Definition</b>	Target population: Index children in the program
	Numerator : Number of index children in the program who are reported to Child Welfare Services for suspected maltreatment
	Denominator: Total number of index children in the program
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease the percentage of suspected maltreatment cases among index children in the program in year 2 compared to suspected maltreatment cases among index children in the program in year 1.
<b>Cohort</b>	Calculation: Number of index children in the program who are reported to Child Welfare Services for suspected maltreatment in year 2 divided by the total number of index children in the program in year 2 compared to the number of index children in the program who are reported to Child Welfare Services for suspected maltreatment in year 1 divided by the total number of index children in the program in year 1
<b>Data Source</b>	Hawaii Dept. of Human Services, Child Welfare Services
<b>Measurement Tool</b>	CWS report, report will contain aggregate data on unidentified index children in the program that are involved in cases of suspected maltreatment.
<b>Reliability/Validity</b>	N/A

<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: MIECHV Statewide Home Visiting Coordinator will submit identifiable program data to CWS and CWS will return de-identified aggregate data to MIECHV Statewide Home Visiting Coordinator
	Data collection schedule: semi annually for CQI
	Analysis: Annually reported
<b>Comments/Anticipated Challenges</b>	We will report by physical abuse, neglect, medical neglect, sexual abuse, psychological abuse and threatened harm by age category (0-12 months, 13-36 months, and 37-60 months)
	The total number of index children in the program could be impacted by parents who do not provide consent to obtain information from DHS-CWS
<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>6. Reported substantiated maltreatment</b>
<b>Performance Measure</b>	Percent of substantiated maltreatment cases among index children in the program enrolled during the cohort year
<b>Operational Definition</b>	Target Population: Index children in the program
	Numerator : Number of index children in the program who are substantiated by Child Welfare Services for maltreatment
	Denominator: Total number of index children in the program
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease the percent of substantiated maltreatment cases among index children in the program in year 2 compared to substantiated maltreatment cases among index children in the program in year 1
<b>Cohort</b>	Calculation: Number of index children in the program who are substantiated by Child Welfare Services for maltreatment in year 2 divided by the total number of index children in the program in year 2 compared to the number of index children in the program who are substantiated by Child Welfare Services for maltreatment in year 1 divided by the total number of index children in the program in year 1.
<b>Data Source</b>	Dept. of Human Services – Child Welfare Services
<b>Measurement Tool</b>	CWS report, report will contain unidentified index children in the program that are involved in cases of substantiated maltreatment

<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: MIECHV Statewide Home Visiting Coordinator will submit identifiable program data to CWS and CWS will return de-identified aggregate data to MIECHV Statewide Home Visiting Coordinator
	Data collection schedule: semi annually for CQI
	Analysis: annually reported
<b>Comments/Anticipated Challenges</b>	We will report by physical abuse, neglect, medical neglect, sexual abuse, psychological abuse and threatened harm by age category (0-12 months, 13-36 months, and 37-60 months)
	The total number of index children in the program could be impacted by parents who do not provide consent to obtain information from DHS-CWS
<b>Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits</b>	
<b>Construct</b>	<b>7. First time victims of maltreatment for index children in the program</b>
<b>Performance Measure</b>	Percentage of index children in the program who are first time victims of maltreatment enrolled during the cohort year
<b>Operational Definition</b>	Target population: All index children in the program
	Numerator: Number of index children in the program who are first time victims of maltreatment
	Denominator: Total number of index children in the program
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease percentage of first time victims of maltreatment of index children in the program in year 2 compared to first time victims of maltreatment of index children in the program in year 1
	Calculation: Number of index children in the program who are first time victims of maltreatment in year 2 divided by the total number of index children in the program in year 2 compared to the number of index children in the program who are first time victims of maltreatment in year 1 divided by the total number of index children in the program in year 1
<b>Cohort</b>	
<b>Data Source</b>	Dept. of Human Services – Child Welfare Services
<b>Measurement Tool</b>	CWS report, report will contain unidentified number of index children in the program that are involved in cases of first time victimization.

<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: MIECHV Statewide Home Visiting Coordinator will submit identifiable program data to CWS and CWS will return de-identified aggregate data to MIECHV Statewide Home Visiting Coordinator
	Data collection schedule: semi annually for CQI
	Analysis: annually reported
<b>Comments/Anticipated Challenges</b>	We will report by physical abuse, neglect, medical neglect, sexual abuse, psychological abuse and threatened harm by age category (0-12 months, 13-36 months, and 37-60 months) The total number of index children in the program could be impacted by parents who do not provide consent to obtain information from DHS-CWS First time victim is defined as a child who had a maltreatment disposition of “victim” and never had prior disposition of victim.

<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>1. Parent’s support for children’s learning and development (toys, talking, reading to)</b>
<b>Performance Measure</b>	Percentage of adult enrolled index participants who demonstrate support of index child’s learning and development
<b>Operational Definition</b>	Target Population: Adult enrolled index participants who score below 7 on the Learning Materials subscale of the HOME
	Numerator : Adult enrolled index participants whose Learning Materials subscale score is above 7 at one year post enrollment
	Denominator: The total number of adult enrolled index participants who scored below 7 at one year post enrollment
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease the percent of adult enrolled index participants who score below 7 on the Learning Materials subscale of the Infant Toddler HOME
<b>Individual</b>	Calculation: Number of adult enrolled index participants whose Learning Materials subscale HOME scores are above 7 on the Infant Toddler HOME at one year post enrollment divided by the total number of adult enrolled index participants whose Learning Materials subscale HOME scores are below 7 on the Infant Toddler HOME

<b>Data Source</b>	Infant Toddler HOME administered by home visitor
<b>Measurement Tool</b>	Infant Toddler HOME Sub scale 4- Learning Materials, #26-34; cut off threshold below 7
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will administer the HOME and the data personnel will enter results into database.
	Data collection schedule: 1 year post enrollment
	Analysis: Annually
<b>Comments/Anticipated Challenges</b>	HOME will be used across all models Adult enrolled index participant is one primary caregiver

<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>2. Parent knowledge of child development and of their child's developmental progress</b>
<b>Performance Measure</b>	Percentage of ASQ results that adult enrolled index participant reviewed with the home visitor
<b>Operational Definition</b>	Target population: Adult enrolled index participants
	Numerator : Number of ASQ results reviewed with the adult enrolled index participants
	Denominator: Total number of ASQ s administered at target age (8 months or 36 months)
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain percentage of ASQ results that were reviewed with the adult enrolled index participant in year 2 as compared to percentage of ASQ results that were reviewed with the adult enrolled index participant in year 1
<b>Cohort</b>	Calculation: Number of ASQ results reviewed with the adult enrolled index participants in year 2 divided by the total number of ASQs administered in year 2 compared to the number of ASQ results reviewed with the adult enrolled index participants in year 1 divided by the total number of ASQs administered in year 1
<b>Data Source</b>	Administrative record review

<b>Measurement Tool</b>	“What was the date the ASQ test result was reviewed with the adult enrolled index participant?”
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will record the date the ASQ was reviewed with the adult enrolled index participant and the data personnel will enter the data into the database.
	Data collection schedule: EHS, HFA, PAT: 8 month ASQ HIPPIY: 36 months
	Analysis: At target age and annually
<b>Comments/Anticipated Challenges</b>	Process measure
	Check program policy and procedures to ensure that the ASQ is reviewed w/parent
<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>3. Parenting behaviors and parent-child relationship (discipline strategy, play interaction)</b>
<b>Performance Measure</b>	The percentage of adult enrolled index participants that score above the median for the Infant Toddler HOME at one year post enrollment
<b>Operational Definition</b>	Target population: Adult enrolled index participants who score below the median at enrollment
	Numerator: Number of adult enrolled index participants whose HOME scores are above 32 on the Infant Toddler HOME at one year post enrollment
	Denominator: Total number of adult enrolled index participants with a HOME score below 32 at enrollment
<b>Definition of improvement and calculation</b>	Definition of improvement: Decrease the percentage of adult enrolled index participants who score below 32 on the Infant Toddler HOME at one year post enrollment in year 2 as compared to percentage of adult enrolled index participants who score below 32 on the Infant Toddler HOME at one year post enrollment in year 1
<b>Cohort</b>	Calculation: Number of adult enrolled index participants whose HOME scores are above 32 on the Infant Toddler HOME at year one post enrollment divided by the total number of adult enrolled index participants in year one with a HOME score below 32 at enrollment compared to number of adult enrolled index participants whose HOME scores are above 32 on the Infant Toddler HOME at year two post enrollment divided by the total number of adult enrolled index participants in year two with a HOME score below 32 on the Infant Toddler HOME at year two post enrollment.

<b>Data Source</b>	HOME administered by home visitor
<b>Measurement Tool</b>	HOME
<b>Reliability/Validity</b>	HOME Observation for Measurement of the Environment (HOME) Inventory Administration Manual, Third Edition, 2001 (cited 2011 May). Available from: <a href="http://www.acf.hhs.gov/programs/opre/ehs/perf_measures/reports/resources_measuring/res_meas_phio.html">http://www.acf.hhs.gov/programs/opre/ehs/perf_measures/reports/resources_measuring/res_meas_phio.html</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will administer the HOME and the data entry personnel will enter results into the database
	Data collection schedule: At enrollment (within 90 days) and 1 year post enrollment
	Analysis: Annually
<b>Comments/Anticipated Challenges</b>	HOME will be used across all models
<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>4. Parent emotional well-being or parenting stress</b>
<b>Performance Measure</b>	Percent of mothers who screened for depression by 6 months post enrollment
<b>Operational Definition</b>	Target population: Enrolled mothers in the program
	Numerator: Number of enrolled mothers who were screened for depressive symptoms using the Edinburgh Postnatal Depression Scale between enrollment and 6 months post enrollment
	Denominator: Total number of enrolled mothers
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the percent of enrolled mothers who are screened for depression between enrollment and 6 months post enrollment in year 2, as compared to the percent of enrolled mothers who are screened for depression between enrollment and 6 months post enrollment in year 1.
<b>Cohort</b>	Calculation: Number of enrolled mothers who were screened for depression between enrollment and 6 months post enrollment in year 2 divided by the total number of enrolled mothers in year 2 compared to the number of enrolled mothers who were screened for depression between enrollment and 6 months post enrollment in year 1 divided by the total number of enrolled mothers in year 1.
<b>Data Source</b>	Collected by home visitor

<b>Measurement Tool</b>	Edinburgh Postnatal Depression Scale  Question: "Was the EPDS administered?"
<b>Reliability/Validity</b>	The EPDS has been found to have good reliability and validity, with a sensitivity of 86%, a specificity of 78% and a split-half reliability of .99 with a standardized $\alpha$ coefficient of .87 <sup>2</sup>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data entry personnel will enter the response into the database.
	Data collection schedule: Collected by six months post enrollment
	Analysis: Six months for CQI and report annually
<b>Comments/Anticipated Challenges</b>	
<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>5. Child's communication, language, and emergent literacy</b>
<b>Performance Measure</b>	Percentage of index children who are screened for developmentally appropriate Communication skills at the target age
<b>Operational Definition</b>	Target population: enrolled index children at target age
	Numerator: Number of enrolled index children screened for developmentally appropriate communication skills at target age
	Denominator: Total number of enrolled index children at target age
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain 90% of enrolled index children who are screened for developmentally appropriate skills at target age
<b>Process Individual comparison</b>	Calculation: Number of enrolled index children screened for developmentally appropriate communication skills at target age divided by the total number of enrolled index children at target age.

<sup>2</sup> The origins and development of the Edinburgh Postnatal Depression Scale. The Royal College of Psychiatrists. [http://www.rcpsych.ac.uk/files/samplechapter/81\\_1.pdf](http://www.rcpsych.ac.uk/files/samplechapter/81_1.pdf). Accessed July 11, 2011.

<b>Data Source</b>	Administered by home visitor at index child's target age
<b>Measurement Tool</b>	Age relevant ASQ 3
<b>Reliability/Validity</b>	ASQ-3 Ages and Stages Questionnaires Third Edition, Excerpted from ASQ-3 User's Guide (cited 2011 May). Available from: <a href="http://www.brookespublishing.com/store/books/squires-asq3-technical.pdf">http://www.brookespublishing.com/store/books/squires-asq3-technical.pdf</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will administer the ASQ 3 and the data entry personnel will enter the results into the database
	Data collection schedule: At target age
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	HFA target age: 8 months PAT target age: 8 months HIPYP target age: 36 months EHS target age: 8 months

<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>6. Child's general cognitive skills</b>
<b>Performance Measure</b>	Percentage of index children who are screened for general cognitive skills at the target age
<b>Operational Definition</b>	Target population: enrolled index children at target age
	Numerator: Number of enrolled index children screened for general cognitive skills at target age
	Denominator: Total number of enrolled index children at target age
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain 90% of enrolled index children who are screened for general cognitive skills at target age  Calculation: Number of enrolled index children screened for general cognitive skills at target age divided by the total number of enrolled index children at target age
<b>Process</b> <b>Individual comparison</b>	

<b>Data Source</b>	Administered by home visitor at index child's target age
<b>Measurement Tool</b>	Age relevant ASQ 3
<b>Reliability/Validity</b>	ASQ-3 Ages and Stages Questionnaires Third Edition, Excerpted from ASQ-3 User's Guide (cited 2011 May). Available from: <a href="http://www.brookespublishing.com/store/books/squires-asq3-technical.pdf">http://www.brookespublishing.com/store/books/squires-asq3-technical.pdf</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will administer the ASQ 3 and the data entry personnel will enter the results into the database
	Data collection schedule: at target age
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	HFA target age: 8 months PAT target age: 8 months HIPYP target age: 36 months EHS target age: 8months

<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>7. Child's positive approaches to learning including attention</b>
<b>Performance Measure</b>	Percentage of index children who score above the cut off on the target age ASQ SE
<b>Operational Definition</b>	Target population: Index children at target age
	Numerator: Number of index children at target age that score above the cut off on the target age ASQ- SE
	Denominator: Number of index children at target age
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain 90% of enrolled index children who scored above the cut off at the target age
<b>Process Individual comparison</b>	Calculation: Number of index children at target age that score above the cut off on the target age ASQ-SE divided by the total number of index children at the target age.

<b>Data Source</b>	Administered by home visitor at index child's target age
<b>Measurement Tool</b>	age specific ASQ SE
<b>Reliability/Validity</b>	Minnesota Department of Health; Developmental and Social-Emotional Screening of Young children (0-6 years of age) in Minnesota (cited 2011 May). Available from: <a href="http://www.health.state.mn.us/divs/fh/mch/devscrn/instr/asqse.html">http://www.health.state.mn.us/divs/fh/mch/devscrn/instr/asqse.html</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will administer the ASQ SE and the data entry personnel will enter the results into the database
	Data collection schedule: at target age
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	HFA target age: 6 months PAT target age: 6 months EHS target age: 6 months HIPPI target age: 36 months

<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>8. Child's social behavior, emotional regulation and emotional well-being</b>
<b>Performance Measure</b>	Percentage of index children who score above the cut off on the target age ASQ SE
<b>Operational Definition</b>	Target population: Index children at target age
	Numerator: Number of index children at target age that score above the cut off on the target age ASQ- SE
	Denominator: Number of index children at target age
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain 90% of enrolled index children who scored above the cut off at the target age.
<b>Process</b> <b>Individual comparison</b>	Calculation: Number of index children at target age that score above the cut off on the target age ASQ-SE divided by the total number of index children at the target age.

<b>Data Source</b>	Administered by home visitor at index child's target age
<b>Measurement Tool</b>	age specific ASQ SE
<b>Reliability/Validity</b>	Minnesota Department of Health; Developmental and Social-Emotional Screening of Young children (0-6 years of age) in Minnesota (cited 2011 May). Available from: <a href="http://www.health.state.mn.us/divs/fh/mch/devscrn/instr/asqse.html">http://www.health.state.mn.us/divs/fh/mch/devscrn/instr/asqse.html</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: : Home visitor will administer the ASQ SE and the data entry personnel will enter the results into the database
	Data collection schedule: at target age
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	HFA target age: 6 months PAT target age: 6 months EHS target age: 6 months HIPPY target age: 36 months

<b>Benchmark 3: Improvements in School Readiness and Achievement</b>	
<b>Construct</b>	<b>9. Child's physical health and development</b>
<b>Performance Measure</b>	Percentage of index children who score above the cut off on the Gross Motor section of the ASQ 3
<b>Operational Definition</b>	Target population: enrolled index children at target age
	Numerator: number of enrolled index children that score above the cut off for the Gross Motor section of the ASQ3 at target age
	Denominator: number of enrolled index children at target age
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain at 90% the percentage of enrolled index children who scored above the cut off at the target age at year 2 compared to index children who scored above the cut off at the target age at year 1

<b>Cohort</b>	Calculation: Number of enrolled index children that score above the cut off for the Gross Motor section of the ASQ 3 at target age in year 2 divided by the total number of enrolled index children at target age in year 2 compared to the number of enrolled index children that score above the cut off for the Gross Motor section of the ASQ 3 at target age in year 1 divided by the total number of enrolled index children at target age in year 1
<b>Data Source</b>	Administered by home visitor at index child's target age
<b>Measurement Tool</b>	age specific ASQ 3 Gross Motor section
<b>Reliability/Validity</b>	ASQ-3 Ages and Stages Questionnaires Third Edition, Excerpted from ASQ-3 User's Guide (cited 2011 May). Available from: <a href="http://www.brookespublishing.com/store/books/squires-asq3-technical.pdf">http://www.brookespublishing.com/store/books/squires-asq3-technical.pdf</a>
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will administer the ASQ 3 and the data entry personnel will enter the results into the database
	Data collection schedule: at target age
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	HFA target age: 8 months PAT target age: 8 months EHS target age: 8 months HIPPY target age: 36 months
<b>Benchmark 4: Domestic Violence</b>	
<b>Construct</b>	<b>1. Screening for Domestic Violence</b>
<b>Performance Measure</b>	The percentage of adult enrolled index parents who are screened for Domestic Violence within 6 months post enrollment
<b>Operational Definition</b>	Target population: Adult enrolled index mothers
	Numerator: Number of enrolled index mothers who are screened for Domestic Violence within 6 months post enrollment
	Denominator: Total number of enrolled index mothers who remain in the program for at least 6 months
<b>Definition of improvement and</b>	Definition of improvement: Increase or maintain at 90% of adult enrolled mothers who were screened for Domestic

<b>calculation</b>	Violence within 6 months post enrollment.
<b>Process Individual comparison</b>	Calculation: Number of enrolled index mothers who are screened for Domestic Violence within 6 months post enrollment divided by the total number of enrolled index mothers.
<b>Data Source</b>	Questionnaire administered by home visitor
<b>Measurement Tool</b>	Women’s Experience with Battering Scale  All models will use the Women’s Experience with Battering Scale
<b>Reliability/Validity</b>	Women’s Experience with Battering Scale – Reliability/Validity = Cronbach’s alpha: 0.95; Sensitivity: 86.0%; Specificity: 91.0% (Using ISA as the gold standard).Smith, Tessaro, & Earp, 1995 (from Intimate Partner Violence and Sexual Violence Victimization Assessment Instruments for Use in Healthcare Settings Version 1.0)
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will administer the questionnaire to the adult enrolled index mother and the data entry personnel will enter the data in the database Data collection schedule: within 6 months post enrollment Analysis: annually
<b>Comments/Anticipated Challenges</b>	It may be difficult for us to reach 90% during year 1 due to the need to train staff.

<b>Benchmark 4: Domestic Violence</b>	
<b>Construct</b>	<b>2. Of families identified for DV, no. of referrals made to DV services</b>
<b>Performance Measure</b>	The percentage of enrolled index parents who received referrals to domestic violence services.
<b>Operational Definition</b>	Target population: Enrolled index mothers who scored above 20 on the Women’s Experience with Battering Scale  Numerator: Number of enrolled index mothers who received a referral to domestic violence services  Denominator: Total number of enrolled index mothers who scored above 20 on the Women’s Experience with Battering Scale.
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain at 90% the number of enrolled index mothers who received referrals to domestic violence services.

<b>Process Individual comparison</b>	Calculation: Number of enrolled index mothers who received a referral to domestic violence services divided by the total number of enrolled index mothers who scored above 20 on the Women’s Experience with Battering Scale
<b>Data Source</b>	Data will be recorded by data personnel when the home visitor refers an enrolled index mother to relevant domestic violence services
<b>Measurement Tool</b>	N/A
<b>Reliability/Validity</b>	Women’s Experience with Battering Scale – Reliability/Validity = Cronbach’s alpha: 0.95; Sensitivity: 86.0%; Specificity: 91.0% (Using ISA as the gold standard).Smith, Tessaro, & Earp, 1995 (from Intimate Partner Violence and Sexual Violence Victimization Assessment Instruments for Use in Healthcare Settings Version 1.0)
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will make the referral to relevant domestic violence services and data personnel will enter the data in the database
	Data collection schedule: Within 30 days of administration of Women’s Experience with Battering Scale
	Analysis: quarterly for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	Many rural areas have very limited relevant domestic violence resources

<b>Benchmark 4: Domestic Violence</b>	
<b>Construct</b>	<b>3. Of families identified for Dv, no. of families with a completed safety plan</b>
<b>Performance Measure</b>	The percentage of adult enrolled index parents who scored above 20 on the Women’s Experience with Battering Scale who complete a safety plan
<b>Operational Definition</b>	Target population: Enrolled index mothers who scored above 20 on the Women’s Experience with Battering Scale.
	Numerator: Number of enrolled index mothers who completed a safety plan
	Denominator: Total number of enrolled index mothers who scored above 20 on the Experience with Battering Scale.
<b>Definition of improvement and</b>	Definition of improvement: Increase or maintain at 90% the number of enrolled index mothers who completed a safety plan.

<b>calculation</b>	Calculation: Number of enrolled index mothers who completed a safety plan divided by the total number of enrolled index mothers who scored above 20 on the Women’s Experience with Battering Scale.
<b>Process Individual comparison</b>	
<b>Data Source</b>	Data will be recorded by data personnel when the home visitor develops a safety plan
<b>Measurement Tool</b>	Completed Safety Plan
<b>Reliability/Validity</b>	Women’s Experience with Battering Scale – Reliability/Validity = Cronbach’s alpha: 0.95; Sensitivity: 86.0%; Specificity: 91.0% (Using ISA as the gold standard).Smith, Tessaro, & Earp, 1995 (from Intimate Partner Violence and Sexual Violence Victimization Assessment Instruments for Use in Healthcare Settings Version 1.0)
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home Visitor will develop the safety plan and data personnel will enter the data in the database
	Data collection schedule: Within 30 days of administration of the Women’s Experience with Battering Scale
	Analysis: quarterly for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 5: Family Economic Self Sufficiency</b>	
<b>Construct</b>	<b>1. Household income and benefits</b>
<b>Performance Measure</b>	Total income of the adult enrolled index participants
<b>Operational Definition</b>	Target population: Adult enrolled index participants
	Numerator: Total income for adult enrolled index participants
	Denominator: Total number of adult enrolled index participants
<b>Definition of improvement and</b>	Definition of improvement: Increase in the average total income of the adult enrolled index participants at enrollment

<b>calculation</b>	and one year post enrollment
<b>Individual</b>	Calculation: Average income of adult enrolled index participants one year post enrollment minus the average income of adult enrolled index participants at month of enrollment
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	Question: Please estimate your annual total household income
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data personnel will enter the data in the database
	Data collection schedule: month of enrollment and one year post enrollment
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	<p>We are only collecting income, rather than ask the home visitor to estimate in-kind benefits.</p> <p>Income is defined as estimated earnings from work, plus other sources of cash support. These sources may be private, e.g., rent from tenants/borders, cash assistance from friends or relatives, or they may be linked to public assistance, i.e., child support payments, TANF, Social Security (SSI/SSDI/OAI), and unemployment insurance.</p>

<b>Benchmark 5: Family Economic Self Sufficiency</b>	
<b>Construct</b>	<b>2. Employment of adult members of household</b>
<b>Performance Measure</b>	Number of monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household
<b>Operational Definition</b>	Target population: Adult enrolled index participants
	Numerator: Total number of monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household

	Denominator: Total number of adult enrolled index participants
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase in the average number of monthly paid hours plus unpaid hours devoted to infant care (30 hours max) by all adult enrolled index participant members of the household at enrollment and one year post enrollment
<b>Individual</b>	Calculation: Number of average monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household one year post enrollment minus average monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household in month of enrollment
<b>Data Source</b>	Collected by home visitor in month of enrollment and one year post enrollment
<b>Measurement Tool</b>	Question: Estimate your total monthly paid hours and unpaid hours devoted to infant care (30 hours max)
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data personnel will enter the data in the database
	Data collection schedule: month of enrollment and one year post enrollment
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 5: Family Economic Self Sufficiency</b>	
<b>Construct</b>	<b>3. Education of adult members of household</b>
<b>Performance Measure</b>	Number of hours per month spent by adult enrolled index participants in education programs
<b>Operational Definition</b>	Target population: Adult enrolled index participants
	Numerator: Number of hours per month spent by adult enrolled index participants in education programs

	Denominator: Total number of adult enrolled index participants
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase in the average hours per month spent by adult enrolled index participants in education programs at enrollment and one year post enrollment
<b>Individual</b>	Calculation: Number of average hours per month spent by adult enrolled index participants in education programs one year post enrollment minus the average hours per month spent by adult enrolled index participants in education programs in month of enrollment
<b>Data Source</b>	Collected by home visitor in month of enrollment and one year post enrollment
<b>Measurement Tool</b>	Question: Estimate your total monthly hours spent in education programs
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data personnel will enter the data in the database Home
	Data collection schedule: month of enrollment and one year post enrollment
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	Education programs are defined as secondary, post secondary, trade school.

<b>Benchmark 5: Family Economic Self Sufficiency</b>	
<b>Construct</b>	<b>4. Health Insurance status</b>
<b>Performance Measure</b>	Percent of mothers and index children with health insurance
<b>Operational Definition</b>	Target population: Enrolled mothers and children
	Numerator: Number of mothers with health insurance plus the number of index children with health insurance.

	Denominator: Total number of enrolled mothers and children
<b>Definition of improvement and calculation</b>	<p>Definition of improvement: Increase or maintain the percentage of enrolled mothers and index children with health insurance at enrollment and one year post enrollment</p> <p>Calculation: The number of enrolled mothers and index children with insurance at enrollment divided by the total number of enrolled mothers and index children compared to the total number of enrolled mothers and index children with insurance at one year post enrollment divided by the total number of enrolled mothers and index children one year post enrollment</p>
<b>Individual</b>	
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	“Do you currently have health insurance?” “Does your child currently have health insurance?”
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visitor will ask the questions and the data entry personnel will enter the response into the database.
	Data collection schedule: Quarterly
	Analysis: Every 6 months for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 6: Coordination and Referrals for Other Community Resources and Supports</b>	
<b>Construct</b>	<b>1. Number of families identified for necessary services</b>
<b>Performance Measure</b>	Percentage of enrolled index families screened for necessary services
<b>Operational Definition</b>	Target population: Enrolled families
	Numerator: Number of enrolled families screened for necessary services

	Denominator: Total number of enrolled families
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain at 90% of enrolled families screened for necessary services.
<b>Process</b> <b>Individual comparison</b>	Calculation: Number of enrolled families screened for necessary services divided by the total number of enrolled families.
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	Question: What services do you think your family needs?
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data personnel will enter the data in the database
	Data collection schedule: monthly
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	Services: Financial, Women’s Shelter, Support Group, Substance Abuse Treatment, Legal, Material assistance, Family Planning, Clinical Specialist, Nutrition other, Respite, Child Care, Emp/Adult school, Housing, MH/Fam Counseling, PHN, Dental, Financial DHS, Financial Medical, Financial Food Stamps, Nutrition WIC, Nutrition EFNEP, Family Specialist, Preschool, Domestic Violence services, Other

<b>Benchmark 6: Coordination and Referrals for Other Community Resources and Supports</b>	
<b>Construct</b>	<b>2. Number of families that required services and received a referral to available community resources</b>
<b>Performance Measure</b>	Percentage of enrolled families that were screened and received a referral to available community resources
<b>Operational Definition</b>	Target population: Enrolled families

	Numerator: Number of enrolled families screened for necessary services and received a referral
	Denominator: Total number of enrolled families
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain 90% of enrolled families screened for necessary services and who received a referral.
<b>Process</b>	Calculation: Number of enrolled families screened for necessary services and received a referral divided by the total number of enrolled families.
<b>Individual comparison</b>	
<b>Data Source</b>	Collected by home visitor
<b>Measurement Tool</b>	Question: What services has the family been referred to?
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data personnel will enter the data in the database
	Data collection schedule: monthly
	Analysis: quarterly for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	Services: Financial, Women’s Shelter, Support Group, Substance Abuse Treatment, Legal, Material assistance, Family Planning, Clinical Specialist, Nutrition other, Respite, Child Care, Emp/Adult school, Housing, MH/Fam Counseling, PHN, Dental, Financial DHS, Financial Medical, Financial Food Stamps, Nutrition WIC, Nutrition EFNEP, Family Specialist, Preschool, Domestic Violence services, Other

<b>Benchmark 6: Coordination and Referrals for Other Community Resources and Supports</b>	
<b>Construct</b>	<b>3. MOUs: Number of formal agreements with other social service agencies in the community</b>
<b>Performance Measure</b>	Total number of MOUs or other formal agreements home visiting implementing agencies have with other social service agencies in the community
<b>Operational Definition</b>	Target population: Documented MOUs or other formal agreements

	Numerator: The number of documented MOUs or other formal agreements
	Denominator: The number of social service agencies in the community
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the number of formal agreements with social service agencies from year 1 compared to year 2
<b>Cohort</b>	Calculation: Number of formal agreements
<b>Data Source</b>	Home visiting implementing agency's record of documented MOUs or other formal agreements
<b>Measurement Tool</b>	How many MOUs or other formal agreements does your agency have with other social service agencies in the community?
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visiting implementing agency
	Data collection schedule: Quarterly
	Analysis: annually
<b>Comments/Anticipated Challenges</b>	

<b>Benchmark 6: Coordination and Referrals for Other Community Resources and Supports</b>	
<b>Construct</b>	<b>4. Information sharing: Number of agencies which home visiting provider has a clear point of contact in collaborating, including sharing information between agencies</b>
<b>Performance Measure</b>	The total number of collaborating community agencies with which the home visiting implementing agencies has a clear

	point of contact
<b>Operational Definition</b>	Target population: Collaborating community agencies
	Numerator: N/A
	Denominator: N/A
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the number of collaborating community agencies with which the home visiting implementing agency has a clear point of contact at year 1 compared to year 2  Calculation: Number of collaborating community agencies.
<b>Cohort</b>	
<b>Data Source</b>	Home visiting implementing agency's record
<b>Measurement Tool</b>	How many collaborating community agencies does your home visiting implementing agency have a clear point of contact with?
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: Home visiting implementing agency
	Data collection schedule: Quarterly
	Analysis: quarterly for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	Clear point of contact is defined as having: name, phone number, email address

<b>Benchmark 6: Coordination and Referrals for Other Community Resources and Supports</b>	
<b>Construct</b>	<b>5. Number of completed referrals – received report of the services provided</b>
<b>Performance Measure</b>	Total enrolled families that were screened and received a referral for whom receipt of services was confirmed

<b>Operational Definition</b>	Target population: Enrolled families who were screened and received a referral for necessary services
	Numerator: N/A
	Denominator: N/A
<b>Definition of improvement and calculation</b>	Definition of improvement: Increase or maintain the total number of referrals completed by families at year 1 compared to year 2.
<b>Cohort</b>	Calculation: Number of completed referrals that receive a report that the service was provided.
<b>Data Source</b>	Home visiting implementing agency administrative record
<b>Measurement Tool</b>	Did you receive the service for which you were referred?
<b>Reliability/Validity</b>	N/A
<b>Data Collection &amp; Analysis Plan</b>	Person Responsible: The home visitor will ask the question and the data personnel will enter the data in the database
	Data collection schedule: monthly
	Analysis: quarterly for CQI and reported annually
<b>Comments/Anticipated Challenges</b>	Confirmation is defined as family's self report

## Performance/Outcome Measures

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

Instructions: For each construct; please indicate the Performance Target, percent increase/decrease for improvement. Please indicate "N/A" (not applicable) where appropriate.

Applicant's Annual Performance Goal for Fiscal Year 2014 (Attachment D) will be considered the baseline for the Performance Target. How much will the Performance Target increase/decrease in Fiscal Year 2015?

Example: Annual Performance Goal for Fiscal Year 2014: 50 participants  
 Annual Performance Goal for Fiscal Year 2015: 55 participants  
 Target Increased by 10%

Benchmark 1: Improved Maternal and Newborn Health	
<p><b>1. Prenatal Care</b></p>	<p><b>Numerator:</b> women who were pregnant at enrollment who received prenatal care before the end of the 2<sup>nd</sup> trimester</p> <p><b>Denominator:</b> women who were pregnant at enrollment</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>2. Parental Use of alcohol, tobacco, or illicit</b></p>	<p><b>Numerator:</b> Number of enrolled smokers at enrollment who reported decreased smoking at one year post enrollment</p> <p><b>Denominator:</b> Number of enrolled smokers at intake who remain in the program for one year</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>3. Preconception Care</b></p>	<p><b>Numerator:</b> Number of post partum women who reported a post partum examination</p> <p><b>Denominator:</b> Total number of enrolled post partum women who remain in the program for 3 months</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>4. Inter Birth Intervals</b></p>	<p><b>Numerator:</b> Number of enrolled mothers and pregnant women who received birth spacing education within six months of enrollment</p> <p><b>Denominator:</b> Total number of mothers and pregnant women enrolled during the program year for at least 6 months.</p>

**Performance/Outcome Measures**

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

<p><b>5. Screening for maternal depressive symptoms</b></p>	<p><b>Target: Increase by _____%</b></p> <p><b>Numerator: Number of enrolled mothers who were screened for depressive symptoms using the Edinburgh Postnatal Depression Scale between enrollment and 6 months post enrollment</b></p> <p><b>Denominator: Total number of enrolled mothers for at least 6 months</b></p> <p><b>Target: Increase by _____%</b></p>
<p><b>6. Breastfeeding</b></p>	<p><b>Numerator: Total number of weeks that index women who enrolled prenatally spent breastfeeding</b></p> <p><b>Denominator: Number of index women enrolled prenatally</b></p> <p><b>Target: Increase by _____ average no. of weeks</b></p>
<p><b>7. Well Child Visits</b></p>	<p><b>Numerator: Number of index children enrolled for at least 6 months who received the recommended schedule of immunizations</b></p> <p><b>Denominator: Total number of index children in program who have been enrolled for at least 6 months</b></p> <p><b>Target: Increase by _____%</b></p>
<p><b>8. Maternal and Child Health Insurance Status</b></p>	<p><b>Numerator: Number of mothers with health insurance plus the number of index children with health insurance by 6 months post enrollment</b></p> <p><b>Denominator: Total number of enrolled mothers and children who remain enrolled for at least 6 months</b></p> <p><b>Target: Increase by _____%</b></p>

## Performance/Outcome Measures

Agency Name: \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

Benchmark 2: Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits	
<p><b>1. Visits for children to the ED for all causes</b></p>	<p>Numerator: Total number of emergency department visits by index children in the program</p> <p>Denominator: Total number of index children in the program</p> <p><b>Target: Decrease by _____%</b></p>
<p><b>2. Visits of mothers to the ED from all causes</b></p>	<p>Numerator: Total number of emergency department visits by enrolled mothers in the program</p> <p>Denominator: Total number of enrolled mothers in the program</p> <p><b>Target: Decrease by _____%</b></p>
<p><b>3. Information provided or training of participants on prevention of child injuries including safe sleep, shaken baby, TBI, child passenger safety, poisonings, fire safety, water safety, playground safety</b></p>	<p>Numerator: Number of enrolled families who have received information or training on the prevention of child injuries</p> <p>Denominator: Total number of enrolled families</p> <p><b>Target: Increase by _____%</b></p>
<p><b>4. Child injuries requiring medical treatment</b></p>	<p>Numerator: Total number of injuries index children receive requiring medical treatment</p> <p>Denominator: Total number of index children in the program</p> <p><b>Target: Decrease by _____%</b></p>
<p><b>5. Reported suspected maltreatment (allegations)</b></p>	<p>Numerator: Number of index children in the program who are reported to Child Welfare Services for suspected maltreatment</p> <p>Denominator: Total number of index children in the program</p> <p><b>Target: Decrease by _____%</b></p>

**Performance/Outcome Measures**

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

<b>6. Reported substantiated maltreatment</b>	<b>Numerator:</b> Number of index children in the program who are substantiated by Child Welfare Services for maltreatment  <b>Denominator:</b> Total number of index children in the program  <b>Target:</b> Decrease by ____%
<b>7. First time victims of maltreatment for index children in the program</b>	<b>Numerator:</b> Number of index children in the program who are first time victims of maltreatment  <b>Denominator:</b> Total number of index children in the program  <b>Target:</b> Decrease by ____%

## Performance/Outcome Measures

Agency Name: \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

Benchmark 3: Improvements in School Readiness and Achievement	
<p><b>1. Parent's support for children's learning and development (toys, talking, reading to)</b></p>	<p><b>Numerator:</b> Adult enrolled index participants whose Learning Materials subscale score on the HOME is above 7 at one year post enrollment</p> <p><b>Denominator:</b> Total number of adult enrolled index participants who scored below 7 at one year post enrollment</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>2. Parent knowledge of child development and of their child's developmental progress</b></p>	<p><b>Numerator:</b> Number of ASQ results reviewed with the adult enrolled index participant</p> <p><b>Denominator:</b> Total number of ASQs administered at target age ( 8months or 36 months)</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>3. Parenting behaviors and parent-child relationships (discipline strategy, play interaction)</b></p>	<p><b>Numerator:</b> Number of adult enrolled index participants whose HOME scores are above 32 at enrollment</p> <p><b>Denominator:</b> Total number of adult enrolled index participants with a HOME score below 32 at enrollment</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>4. Parent emotional well-being or parenting stress</b></p>	<p><b>Numerator:</b> Number of enrolled mothers who were screened for depressive symptoms using the Edinburgh Postnatal Depression Scale between enrollment and 6 months post enrollment</p> <p><b>Denominator:</b> Total number of enrolled mothers</p> <p><b>Target:</b> Increase by _____%</p>
<p><b>5. Child's communication, language, and emergent literacy</b></p>	<p><b>Numerator:</b> Number of enrolled index children screened for developmentally appropriate communication skills at target age</p> <p><b>Denominator:</b> Total number of enrolled index children at target age</p> <p><b>Target:</b> Increase by _____%</p>

**Performance/Outcome Measures**

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

<p><b>6. Child's general cognitive skills</b></p>	<p><b>Numerator: Number of enrolled index children screened for general cognitive skills at target age</b></p> <p><b>Denominator: Total number of enrolled index children at target age</b></p> <p><b>Target: Increase by _____%</b></p>
<p><b>7. Child's positive approaches to learning including attention</b></p>	<p><b>Numerator: Number of index children at target age that score above the cut off on the target age ASQ-SE</b></p> <p><b>Denominator: Number of index children at target age</b></p> <p><b>Target: Increase by _____%</b></p>
<p><b>8. Child's social behavior, emotional regulation and emotional well-being</b></p>	<p><b>Numerator: Number of index children at target age that score above the cut off on the target age ASQ-SE</b></p> <p><b>Denominator: Number of index children at target age</b></p> <p><b>Target: Increase by _____%</b></p>
<p><b>9. Child's physical health and development</b></p>	<p><b>Numerator: Number of enrolled index children that score above the cut off for the Gross Motor section of the ASQ3 at target age</b></p> <p><b>Denominator: Number of enrolled index children at target age</b></p> <p><b>Target: Increase by _____%</b></p>

**Performance/Outcome Measures**

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

<b>Benchmark 4: Domestic Violence</b>	
<b>1. Screening for Domestic Violence</b>	<p><b>Numerator:</b> Number of enrolled index mothers who are screened for Domestic Violence within 6 months post enrollment</p> <p><b>Denominator:</b> Total number of enrolled index mothers who remain in the program for at least 6 months</p> <p><b>Target:</b> Increase by _____%</p>
<b>2. Of families identified for DV, no. of referrals made to DV services</b>	<p><b>Numerator:</b> Number of enrolled index mothers who received a referral to domestic violence services</p> <p><b>Denominator:</b> Total number of enrolled index mothers who scored above 20 on the Women’s Experience with Battering Scale</p> <p><b>Target:</b> Increase by _____%</p>
<b>3. Of families identified for DV, no. of families with a completed safety plan</b>	<p><b>Numerator:</b> Number of enrolled index mothers who completed a safety plan</p> <p><b>Denominator:</b> Total number of enrolled index mothers who scored above 20 on the Experience with Battering Scale</p> <p><b>Target:</b> Increase by _____%</p>

**Performance/Outcome Measures**

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

<b>Benchmark 5: Family Economic Self Sufficiency</b>	
<b>1. Household income</b>	<p><b>Numerator:</b> Total income for adult enrolled index participants</p> <p><b>Denominator:</b> Total number of adult enrolled index participants</p> <p><b>Target:</b> Increase by _____%</p>
<b>2. Employment of adult members of household</b>	<p><b>Numerator:</b> Total number of monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household</p> <p><b>Denominator:</b> Total number of adult enrolled index participants</p> <p><b>Target:</b> Increase by _____%</p>
<b>3. Education of adult members of household</b>	<p><b>Numerator:</b> Number of hours per month spent by adult enrolled index participants in education program</p> <p><b>Denominator:</b> Total number of adult enrolled index participants</p> <p><b>Target:</b> Increase by _____%</p>

**Performance/Outcome Measures**

**Agency Name:** \_\_\_\_\_

Fiscal Year July 1, 2014 to June 30, 2015

<b>Benchmark 6: Coordination and Referrals for Other Community Resources and Supports</b>	
<b>1. Number of families identified for necessary services</b>	<p>Numerator: Number of enrolled families screened for necessary services</p> <p>Denominator: Total number of enrolled families</p> <p><b>Target: Increase by ____%</b></p>
<b>2. Number of families that required services and received a referral to available community resources</b>	<p>Numerator: Number of enrolled families screened for necessary services and received a referral</p> <p>Denominator: Total number of enrolled families</p> <p><b>Target: Increase by ____%</b></p>
<b>3. MOUs: Number of formal agreements with other social service agencies in the community</b>	<p>Numerator: Number of documented MOUs or other formal agreements</p> <p>Denominator: Number of social service agencies in the community</p> <p><b>Target: Increase by ____%</b></p>
<b>4. Information sharing: Number of agencies which home visiting provider has a clear point of contact in collaborating, including sharing information between agencies</b>	<p>Number of collaborating community agencies</p> <p><b>Target: Increase by ____%</b></p>
<b>5. Number of completed referrals – received report of the services provided</b>	<p>Number of referrals completed for families</p> <p><b>Target: Increase by ____%</b></p>

**HAWAII HOME VISITING NETWORK**  
**HOME VISITING OUTPUT MEASURES FY 2014**  
**AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C
Program Activity		Annual Performance Goal for Fiscal Year 2014	Applicant's approach in meeting the output objective, including the methodology proposed for data collection and reporting. (Attach additional sheets as necessary.)
A1	Women who were pregnant at enrollment who received their first prenatal care visit before the end of the second trimester		
A2	Number of enrolled smokers at intake, who reported decreased smoking by one year post enrollment		
A3	Number of post partum women who reported a post partum examination		
A4	Total number of enrolled mothers and pregnant women who received birth spacing education within six months of enrollment		
A5	Number of enrolled mothers who were screened for depressive symptoms using the Edinburgh Postnatal Depression Scale between enrollment and 6 months post enrollment		
A6	Total number of weeks that index women who enrolled prenatally spent breastfeeding		

**HAWAII HOME VISITING NETWORK  
HOME VISITING OUTPUT MEASURES FY 2014  
AGENCY NAME: \_\_\_\_\_**

<b>Column A</b>		<b>Column B</b>	<b>Column C</b>
<b>Program Activity</b>		<b>Annual Performance Goal for Fiscal Year 2014</b>	<b>Applicant's approach in meeting the output objective, including the methodology proposed for data collection and reporting. (Attach additional sheets as necessary.)</b>
<b>A7</b>	<b>Number of index children enrolled for at least 6 months who received the recommended schedule of immunizations</b>		
<b>A8</b>	<b>Number of mothers with health insurance plus the number of index children with health insurance by 6 months post enrollment</b>		
<b>B9</b>	<b>Total number of emergency department visits by index children in the program</b>		
<b>B10</b>	<b>Total number of emergency department visits by enrolled mothers in the program</b>		
<b>B11</b>	<b>Number of enrolled families who have received information or training on the prevention of child injuries</b>		
<b>B12</b>	<b>Total number of injuries index children receive requiring medical treatment</b>		
<b>B13</b>	<b>Number of index children in the program who are reported to Child Welfare Services for suspected maltreatment</b>		

**HAWAII HOME VISITING NETWORK**  
**HOME VISITING OUTPUT MEASURES FY 2014**  
**AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C
Program Activity		Annual Performance Goal for Fiscal Year 2014	Applicant's approach in meeting the output objective, including the methodology proposed for data collection and reporting. (Attach additional sheets as necessary.)
<b>B14</b>	<b>Number of index children in the program who are substantiated by Child Welfare Services for maltreatment</b>		
<b>B15</b>	<b>Number of index children in the program who are first time victims of maltreatment</b>		
<b>C16</b>	<b>Adult enrolled index participants whose Learning Materials subscale score is above 7 at one year post enrollment</b>		
<b>C17</b>	<b>Number of ASQ results reviewed with the adult enrolled index participants</b>		
<b>C18</b>	<b>Number of adult enrolled index participants whose HOME scores are above 32 on the HOME at one year post enrollment</b>		
<b>C19</b>	<b>Number of enrolled mothers who were screened for depressive symptoms or stress using the Edinburgh Postnatal Depression Scale or the Parent Stress Index between enrollment and 6 months post enrollment</b>		

**HAWAII HOME VISITING NETWORK  
HOME VISITING OUTPUT MEASURES FY 2014  
AGENCY NAME: \_\_\_\_\_**

<b>Column A</b>		<b>Column B</b>	<b>Column C</b>
<b>Program Activity</b>		<b>Annual Performance Goal for Fiscal Year 2014</b>	<b>Applicant's approach in meeting the output objective, including the methodology proposed for data collection and reporting. (Attach additional sheets as necessary.)</b>
<b>C20</b>	<b>Number of enrolled index children screened for developmentally appropriate communication skills at target age</b>		
<b>C21</b>	<b>Number of enrolled index children screened for general cognitive skills at target age</b>		
<b>C22</b>	<b>Number of index children at target age that score above the cut off on the target age ASQ- SE</b>		
<b>C23</b>	<b>Number of index children at target age that score above the cut off on the target age ASQ- SE</b>		
<b>C24</b>	<b>number of enrolled index children that score above the cut off for the Gross Motor section of the ASQ3 at target age</b>		
<b>D27</b>	<b>Number of enrolled index mothers who are screened for Domestic Violence within 6 months post enrollment</b>		

**HAWAII HOME VISITING NETWORK  
HOME VISITING OUTPUT MEASURES FY 2014  
AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C
Program Activity		Annual Performance Goal for Fiscal Year 2014	Applicant's approach in meeting the output objective, including the methodology proposed for data collection and reporting. (Attach additional sheets as necessary.)
<b>D28</b>	<b>Number of enrolled index mothers who received a referral to domestic violence services</b>		
<b>D29</b>	<b>Number of enrolled index mothers who completed a safety plan</b>		
<b>E30</b>	<b>Average income for adult enrolled index participants one year post enrollment</b>		
<b>E31</b>	<b>Total number of monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household</b>		
<b>E32a</b>	<b>Number of hours per month spent by adult enrolled index participants in education programs</b>		
<b>E32b</b>	<b>Number of mothers with health insurance plus the number of index children with health insurance.</b>		
<b>F33</b>	<b>Number of enrolled families screened for necessary services</b>		

**HAWAII HOME VISITING NETWORK  
HOME VISITING OUTPUT MEASURES FY 2014  
AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C
Program Activity		Annual Performance Goal for Fiscal Year 2014	Applicant's approach in meeting the output objective, including the methodology proposed for data collection and reporting. (Attach additional sheets as necessary.)
F34	Number of enrolled families screened for necessary services and received a referral		
F35	The number of documented MOUs or other formal agreements		
F36	The total number of collaborating community agencies with which the home visiting implementing agencies has a clear point of contact		
F37	Total enrolled families that were screened and received a referral for whom receipt of services was confirmed		
G1	Number of children who have a medical home		
G2	Total Families Served		
	<b>Model Specific Outputs</b>		
H1			
H2			
H3			

**HAWAII HOME VISITING NETWORK**  
**HOME VISITING OUTPUT MEASURES MONTHLY REPORT FY 2014**  
**AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C	Column D	Column E	Column E	Column F
Program Activity		Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
A1	Women who were pregnant at enrollment who received their first prenatal care visit before the end of the second trimester						
A2	Number of enrolled smokers at intake, who reported decreased smoking by one year post enrollment						
A3	Number of post partum women who reported a post partum examination						
A4	Total number of enrolled mothers and pregnant women who received birth spacing education within six months of enrollment						

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**HOME VISITING OUTPUT MEASURES MONTHLY REPORT FY 2014**  
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Column A		Column B	Column C	Column D	Column E	Column E	Column F
Program Activity		Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
A5	Number of enrolled mothers who were screened for depressive symptoms using the Edinburgh Postnatal Depression Scale between enrollment and 6 months post enrollment						
A6	Total number of weeks that index women who enrolled prenatally spent breastfeeding						
A7	Number of index children enrolled for at least 6 months who received the recommended schedule of immunizations						
A8	Number of mothers with health insurance plus the number of index children with health insurance by						

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**AGENCY NAME: \_\_\_\_\_**

Column A	Column B	Column C	Column D	Column E	Column E	Column F
Program Activity	Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
	6 months post enrollment					
B9	Total number of emergency department visits by index children in the program					
B10	Total number of emergency department visits by enrolled mothers in the program					
B11	Number of enrolled families who have received information or training on the prevention of child injuries					
B12	Total number of injuries index children receive requiring medical treatment					
B13	Number of index children in the program who are reported to Child Welfare Services					

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**AGENCY NAME: \_\_\_\_\_**

Column A	Column B	Column C	Column D	Column E	Column E	Column F
Program Activity	Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
	for suspected maltreatment					
B14	Number of index children in the program who are substantiated by Child Welfare Services for maltreatment					
B15	Number of index children in the program who are first time victims of maltreatment					
C16	Adult enrolled index participants whose Learning Materials subscale score is above 7 at one year post enrollment					
C17	Number of ASQ results reviewed with the adult enrolled index participants					
C18	Number of adult enrolled index participants whose					

**HAWAII HOME VISITING NETWORK**  
**HOME VISITING OUTPUT MEASURES MONTHLY REPORT FY 2014**  
**AGENCY NAME: \_\_\_\_\_**

Column A	Column B	Column C	Column D	Column E	Column E	Column F
Program Activity	Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
	HOME scores are above 32 on the HOME at one year post enrollment					
C19	Number of enrolled mothers who were screened for depressive symptoms or stress using the Edinburgh Postnatal Depression Scale or the Parent Stress Index between enrollment and 6 months post enrollment					
C20	Number of enrolled index children screened for developmentally appropriate communication skills at target age					
C21	Number of enrolled index children screened for general cognitive skills at target age					
C22	Number of index					

**HAWAII HOME VISITING NETWORK**  
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**AGENCY NAME: \_\_\_\_\_**

Column A	Column B	Column C	Column D	Column E	Column E	Column F
Program Activity	Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
	children at target age that score above the cut off on the target age ASQ- SE					
C23	Number of index children at target age that score above the cut off on the target age ASQ- SE					
C24	number of enrolled index children that score above the cut off for the Gross Motor section of the ASQ3 at target age					
D27	Number of enrolled index mothers who are screened for Domestic Violence within 6 months post enrollment					
D28	Number of enrolled index mothers who received a referral to domestic violence services					

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**AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C	Column D	Column E	Column E	Column F
Program Activity		Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
D29	Number of enrolled index mothers who completed a safety plan						
E30	Average income for adult enrolled index participants one year post enrollment						
E31	Total number of monthly paid hours plus unpaid hours devoted to infant child care (30 hours max) by all adult enrolled index participant members of the household						
E32a	Number of hours per month spent by adult enrolled index participants in education programs						
E32b	Number of mothers with health insurance plus the number of index children						

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**HOME VISITING OUTPUT MEASURES MONTHLY REPORT FY 2014**  
**AGENCY NAME: \_\_\_\_\_**

Column A	Column B	Column C	Column D	Column E	Column E	Column F
<b>Program Activity</b>	<b>Annual Performance Goal for Fiscal Year 2014</b>	<b>Monthly Performance Goal</b>  <b>Column B ÷ 12 months</b>	<b>Prior Reporting Periods to Date</b>  <b>(Cumulative)</b>	<b>Current Reporting Period</b>	<b>Contract Period to Date</b> <b>Column C + Column D</b>	<b>Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)</b>
	<b>with health insurance.</b>					
<b>F33</b>	<b>Number of enrolled families screened for necessary services</b>					
<b>F34</b>	<b>Number of enrolled families screened for necessary services and received a referral</b>					
<b>F35</b>	<b>The number of documented MOUs or other formal agreements</b>					
<b>F36</b>	<b>The total number of collaborating community agencies with which the home visiting implementing agencies has a clear point of contact</b>					
<b>F37</b>	<b>Total enrolled families that were screened and received a referral for whom receipt of services was confirmed</b>					

**HAWAII HOME VISITING NETWORK**  
**HOME VISITING OUTPUT MEASURES MONTHLY REPORT FY 2014**  
**AGENCY NAME: \_\_\_\_\_**

Column A		Column B	Column C	Column D	Column E	Column E	Column F
Program Activity		Annual Performance Goal for Fiscal Year 2014	Monthly Performance Goal  Column B ÷ 12 months	Prior Reporting Periods to Date (Cumulative)	Current Reporting Period	Contract Period to Date Column C + Column D	Explanation of Contract Period to Date variance from Monthly Performance Goal. (Attach additional sheets as necessary.)
G1	Number of children who have a medical home						
G2	Total Families Served						
	<b>Model Specific Outputs</b>						
H1							
H2							
H3							
H4							
H5							