Family Home Visiting Reporting Requirements for 2021

VERSION 1.1

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m1 DEPARTMENT OF HEALTH

Family Home Visiting Reporting Requirements for 2021

Contents

Introduction

Purpose of Data Collection

Family Home Visiting (FHV) programs that receive funding from the Minnesota Department of Health (MDH) are required to collect evaluation data and submit reports to MDH. MDH uses this data for the administration and evaluation of FHV grant programs, including:

- Meeting federal and state reporting requirements
- Reporting to the MN Legislature
- Communicating with stakeholders about the value of FHV services
- Monitoring state, regional, and county performance
- Identifying needs for training and technical assistance
- Prioritization of continuous quality improvement (CQI) projects.

Technical Assistance

FHV Evaluation Data

Resources for FHV grantees are available on the FHV Evaluation page (https://www.health.state.mn.us/communities/fhv/evaluation.html) on the MDH website.

Contact the FHV Evaluation Unit at Health.FHVData@state.mn.us with questions about FHV evaluation data collection and submission.

FHV Grants Management and Invoicing

Resources for FHV grantees are available on the Funding and Grants Management page (https://www.health.state.mn.us/communities/fhv/grant.html) on the MDH website.

Contact the FHV Grants Management Team at Health.FHVGrants@state.mn.us with questions about grant progress reports and invoicing.

FHV Reporting Requirements

Data Practices and Informed Consent

FHV grantees are required to comply with the [Minnesota Government Data Practices Act,](#) as it applies to all data created, collected, received, stored, used, maintained, or disseminated by the grantee under their grant agreements with MDH.

FHV grantees are required to ask home visiting participants for their informed consent to release their individual-level data to the State of Minnesota. Participants must provide their consent in writing before the FHV grantee shares individual-level data with MDH. For more information, refer to the document [FHV Informed Consent Guidance (https://www.health.state.mn.us/docs/communities/fhv/informconsentguide.pdf)](https://www.health.state.mn.us/docs/communities/fhv/informconsentguide.pdf) posted on the MDH website.

IHVE Data System

Individual-level FHV evaluation data is reported to the Information for Home Visiting Evaluation (IHVE) data system. MDH requires recipients of the following grants to submit data to IHVE:

- FHV Temporary Assistance for Needy Families (TANF) grants to Community Health Boards (CHBs)
- Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grants
- State-funded Nurse-Family Partnership (NFP) expansion grants
- State-funded Evidence-Based Home Visiting (EBHV) grants.

Data submission to IHVE is continuous, in near "real-time." FHV providers funded by the grants listed above are expected to complete and submit IHVE forms through their data system in a timely manner after each home visit is completed.

Which participants to report to IHVE

FHV participants served (wholly or in part) by funds from these grants are required to be included in reporting to IHVE, unless the participant has not granted informed consent to release their private data with MDH ("opted out" of data sharing).

Grantees must also track any FHV participants served by funds from these grants that do not grant informed consent to release their private data to the State of Minnesota. These participants should be included in counts of FHV participants reported in the FHV Quarterly Data Collection Form and the TANF Statistical Report (see these sections below).

Reporting to IHVE on FHV Funded by Other Sources

FHV grantees are encouraged to report data to IHVE on FHV participants served entirely with funding sources other than the FHV grants listed above, if the client has given informed consent to share their private data. This includes FHV participants funded by Title V (Maternal and Child

Health Block Grant). Reporting this data will enable MDH to include more complete information on FHV participants to the Legislature, as well as in reports developed for FHV grantees.

Identifying data elements

Identifying data elements must be reported to IHVE according to the level of informed consent given by the participant to share their data with the State of Minnesota. Details about identifying data elements associated with each level of informed consent are provided in Appendix B "Collection of Name and Address Data Elements."

Data collection forms

FHV providers funded by MDH FHV grants must use IHVE-compatible data collection forms to submit data to IHVE. See the FHV Evaluation webpage for a current list of data systems with IHVE-compatible data collection forms: IHVE Data System (https://www.health.state.mn.us/communities/fhv/ihve.html).

MDH maintains IHVE data collection forms in the REDCap system for FHV providers that do not have access to a data system with IHVE-compatible data collection forms. FHV grantees that are interested in connecting additional data systems to IHVE can contact the FHV Evaluation Unit at Health.FHVData@state.mn.us for information on system requirements.

Data collection in IHVE is standardized. Required questions are the same for all FHV grantee and home visiting model or program types, with the exception of MIECHV Target Child Visit-Level Data (see below, "Additional Reporting for MIECHV Grantees").

FHV Quarterly Data Collection Form

FHV grantees receiving EBHV, MIECHV, or NFP Expansion funding are required to complete and submit one FHV Quarterly Data Collection Form per grant each quarter. FHV grant projects consisting of multiple partner agencies should coordinate to complete and submit one form per grant.

This form collects aggregate data, including the count of families served by the grant, plus current staffing information. MDH uses this data to track grantee progress toward meeting and maintaining target caseloads.

Instructions for completing and submitting the FHV Quarterly Data Collection form through the MDH REDCap system are posted on the MDH website: FHV Quarterly Data Collection Form Submission Guide (https://www.health.state.mn.us/docs/communities/fhv/datacollectformguide.pdf).

Grant Progress Report

FHV grantees receiving EBHV, MIECHV, or NFP Expansion funding are required to complete and submit a Progress Report periodically. In 2021, MDH will continue to waive quarterly written progress reporting requirements for the EBHV, MIECHV, and NFP Expansion grants. Instead of reporting on their work plan every quarter, grantees will submit written six-month reports on July 20, 2021 and January 20, 2022. For these reports, grantees will complete a narrative

progress update on their work plan activities. In between these written reports, MDH staff will schedule check-in calls with each grantee's home visiting team. The check-in calls will occur in the spring and fall of 2021.

FHV grantees will receive more information and instructions via email in advance of reporting due dates.

Reporting Due Dates

FHV reporting due dates are subject to change. MDH will notify FHV grantees about changes to reporting due dates and procedures via email. FHV grantees should notify MDH when there are changes to grant program staff, so that MDH has current contact information when sending notification emails.

FHV grantees should also subscribe to the Tuesday Topics email newsletter for announcements of updated due dates and reporting procedures. To subscribe to Tuesday Topics, visit the FHV home page (https://www.health.state.mn.us/communities/fhv/index.html) on the MDH website, and select the link "Subscribe to FHV E-bulletins" in the upper right.

The FHV Quarterly Data Collection Form is due on the 10th of the month (or next business day) following the end of each calendar quarter. Table 1 provides the due dates for 2021.

Table 1. 2021 Reporting schedule for FHV Quarterly Data Collection Forms.

Quarter	End of Quarter	Data submission deadline
Quarter 1	March 31, 2021	April 12, 2021
Quarter 2	June 30, 2021	July 12, 2021
Quarter 3	September 30, 2021	October 11, 2021
Quarter 4	December 31, 2021	January 10, 2022

Additional Reporting for MIECHV Grantees

MIECHV grantees are required to report additional data to MDH to meet federal performance measure requirements. For more information on MIECHV performance measures, visit the Health Resources & Services Administration (HRSA) Home Visiting website (https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview).

MIECHV Target Child Visit-Level Data

MIECHV grantees are required to complete two additional questions for each home visit provided to a family with a MIECHV target child.

1) Did the caregiver have any concerns regarding the child's development, behavior, or learning?

2) Has the child been taken to the emergency room (ER) for an injury since the last visit? (if "Yes" report the approximate date of each ER visit)

Contact the vendor for your data system for more information on where to find these questions in your data system's IHVE-compatible forms.

Child Maltreatment Performance Measure Data

MDH collects data for the MIECHV Child Maltreatment measure each year. This data consists of the aggregate number of children served by MIECHV who were involved with investigated child maltreatment cases. Reporting will be due in early October 2021, for children enrolled in MIECHV home visiting during Federal Fiscal Year 2021 (October 1, 2020 through September 20, 2021).

TANF Statistical Report

The TANF Statistical Report is part of annual reporting for the Title V Maternal and Child Health (MCH) Block Grant. This report is required for CHBs that receive Title V MCH Block Grant federal funds. There are three questions on the TANF Statistical form.

1) Does your agency use any TANF funds for WIC Clinics?

2) The unduplicated number of families served using TANF funds for Home Visiting.

3) The unduplicated number of children and adolescents served using TANF funds for Teen Pregnancy Prevention group activities.

Instructions for submitting reports for Federal Fiscal Year 2020 are posted on the MDH website: Title V Maternal and Child Health (MCH) Block Grant Grantee Information (https://www.health.state.mn.us/communities/titlev/grantees.html).

Reporting for FHV Grantees Implementing MECSH

FHV grantees implementing the Maternal Early Childhood Sustained Home-visiting (MECSH) model are required to submit data on MECSH participants to IHVE to meet model fidelity monitoring requirements. MDH uses IHVE to create MECSH fidelity data files each quarter, which are sent to Western Sydney University for calculation of fidelity measures.

MECSH implementing agencies may also be required to submit additional data to MDH for fidelity monitoring purposes. Review the current version of the MECSH Reporting Guidance (https://www.health.state.mn.us/docs/communities/fhv/mecshmemo.pdf) posted on the MDH website for more information.

Appendices

Appendix A: Version History

Appendix B: Collection of Name and Address Data Elements

Appendix A: Version History

Table 2. Version History for This Document.

Version Number	Release Date	Changes Made
1.0	January 5, 2021	Original Version
1.1	March 23, 2021	Added section on MECSH Reporting Guidance; Updated Grant Progress Report section

Appendix B: Collection of Name and Address Data Elements

FHV providers should submit identifying data elements to IHVE for FHV participants according to the level of informed consent given by the participant (or on the participant's behalf if the participant is a child).

Table 3 lists identifying data elements and their inclusion in or exclusion from each level of informed consent[1] used in FHV evaluation data reporting to IHVE.

Data systems that have IHVE-compatible data entry forms send these data elements to IHVE according to the level of informed consent indicated for each participant. For more information on how to enter the level of informed consent, contact the vendor for your data system.

Table 3. Identifying data elements by level of FHV participant informed consent.

Field Name	Full Consent	Remove Direct Identifiers	No Consent
Caregiver First Name	Include	Exclude	
Caregiver Last Name	Include	Exclude	
Caregiver Maiden Name	Include (Optional)	Exclude	
Child First Name	Include	Exclude	
Child Last Name	Include	Exclude	
Site	Include	Include	
City	Include (Optional)	Exclude	FHV grantees must track the number of participants in this category for aggregate-level data reporting.
Zip Code	Include	Include	
Address	Include (Optional)	Exclude	
Caregiver ID	Include	Include	
Caregiver ID2	Include (Optional)	Include (Optional)	
Child ID	Include	Include	
Child ID2	Include (Optional)	Include (Optional)	
Caregiver Date of Birth	Include	Include	
Child Date of Birth	Include	Include	
Date of Visit[2]	Include	Include	

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[1] Inclusion of identifying data elements in each level of participant informed consent was determined using the HIPAA Privacy Rule's Safe Harbor method for de-identification.

[2] Includes any visit dates, including Date of First Visit, any other Date of Visit, and Date of Closure, if applicable.