# COLORADO MIECHV BENCHMARK PLAN

# August 10, 2012

Note that for Benchmark 1: Improved Maternal and Newborn Health, the HIPPY program is excluded because it serves families with children ages 3 to 5 years of age.

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct i: Prenatal Care***

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| Performance measure | Percent of pregnant women enrolled in MIECHV who have a medical provider within a trimester after intake who did not have a provider at time of enrollment |
| Target population | All enrolled women in the prenatal stage who do not have a medical provider at intake |
| Numerator | # of pregnant women who do not have a medical provider at intake but do at follow up within a trimester (within 6 weeks of intake) |
| Denominator | # of pregnant women who do not have a medical provider at intake |
| Definition of improvement and calculation | Increase the percent of pregnant women who have a medical provider within a trimester (within 6 weeks of intake) who did not have a provider at time of enrollment;<br>**Outcome** improvement within cohort |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: Intake; each trimester<br>PAT: Intake; end of each trimester after enrollment<br>HIPPY: N/A<br>SafeCare: Intake; end of each trimester after enrollment |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Enrollment of pregnant women is low for PAT and SafeCare. Separate from the benchmarks reporting, we will also examine whether women are receiving prenatal care. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct ii: Parental use of alcohol, tobacco or other illicit drugs***

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| Performance measure | Percent of pregnant women enrolled in MIECHV who stop using tobacco after intake |
| Target population | All enrolled women in the prenatal stage |
| Numerator | # of women in the program who indicated tobacco use at intake and at 36 weeks gestation |
| Denominator | # of women in the prenatal stage who indicated tobacco use at intake |

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| Definition of improvement and calculation | Decrease the percent of pregnant women using tobacco from intake to 36 weeks of gestation;<br>**Outcome** improvement within cohort |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: Intake; 36 weeks gestation<br>PAT: Intake; 36 weeks gestation<br>HIPPY: N/A<br>SafeCare: Intake; 36 weeks gestation |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Tobacco was selected because it is one of Colorado's 10 Winnable Battles; note that tobacco use will also be assessed (but not included in benchmark reporting) when index child is 12 months old. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct iii: Preconception Care***

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|---|---|
| Performance measure | Percent of women enrolled in MIECHV who receive one primary care visit within 6 months postpartum |
| Target population | All enrolled women within 6 months postpartum |
| Numerator | # of women in the program who receive 1 primary care visit within 6 months postpartum |
| Denominator | # of enrolled 6 months postpartum women (with a child 6 months old) |
| Definition of improvement and calculation | Increase in the percentage of participants attending a primary care visit within 6 months postpartum;<br>**Outcome** improvement between cohort 1 and 2 |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 6 months postpartum<br>PAT: 6 months postpartum<br>HIPPY: N/A<br>SafeCare: 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Since prenatal enrollment is rare, this measure serves as a proxy for prenatal care for a subsequent pregnancy. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct iv: Inter-birth intervals***

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|---|---|
| Performance measure | Percent of women enrolled in MIECHV who receive |

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|---|---|
| | information about optimal inter-birth intervals within 6 months postpartum |
| Target population | Mothers of infants 6 months or younger |
| Numerator | # of women in the program who received information about optimal inter-birth intervals within 6 months postpartum |
| Denominator | # of enrolled 6-months postpartum women (with a child 6 months old) |
| Definition of improvement and calculation | Increase or maintain the percentage of mothers of infants that receive inter-birth interval information within 6 months postpartum;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Home visit record/client file |
| Measurement tool | N/A |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 6 months postpartum<br>PAT: 6 months postpartum<br>HIPPY: N/A<br>SafeCare: 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | The process measure is being used because most participants are no longer enrolled at the time of a subsequent birth. For NFP, birth control information will be used as a proxy. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct v: Screening for maternal depressive symptoms***

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|---|---|
| Performance measure | Percent of women enrolled in MIECHV who are screened for depression |
| Target population | Enrolled mothers with infants |
| Numerator | 1) # of women in the program that were screened for depressive symptoms at intake; OR<br>2) # of women in the program that were screened for depressive symptoms at 6 months postpartum |
| Denominator | # of enrolled 6-months postpartum women (with a child 6 months old) |
| Definition of improvement and calculation | Increase or maintain the percentage of participating women screened for depression at least once during the 6 months postpartum;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in client record |
| Measurement tool | Edinburgh Postnatal Depression Scale |
| Reliability/Validity | Well established instrument. Additional details available here: http://ihcs.msu.edu/pdf/AppendixF.1-EdinburghUseandValidation.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months postpartum<br>PAT: intake; 6 months postpartum<br>HIPPY: N/A |

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|---|---|
| | SafeCare: intake; 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Each program has more frequent screenings (not used for benchmark reporting) based on national clinical recommendations for scheduled screenings. These data can be compared to PRAMS data. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct vi: Breastfeeding***

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|---|---|
| Performance measure | Percent of women enrolled in MIECHV prenatally who initiate breastfeeding |
| Target population | All enrolled women in the prenatal stage |
| Numerator | # of mothers enrolled in the program while pregnant who initiated breastfeeding at infant's birth |
| Denominator | # of mothers enrolled in the program while pregnant who are at least 2 weeks postpartum |
| Definition of improvement and calculation | Increase in the percentage of mothers in the program who initiate breastfeeding over time;<br>**Outcome** improvement between cohort 1 and 2 |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: by the time child reaches the age of 4 weeks<br>PAT: when child reaches the age of 2 weeks<br>HIPPY: N/A<br>SafeCare: when child reaches the age of 2 weeks |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Additional information on sustained breastfeeding (2 weeks, 6 months, exclusive) will also be collected and analyzed but not included as benchmark measures. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct vii: Well-child visits***

| | |
|---|---|
| Performance measure | Percent of infants enrolled in MIECHV who receive at least one well-child visit by 6 months |
| Target population | Enrolled infants |
| Numerator | # of enrolled infants who received at least one well-child visit by 6 months of age |
| Denominator | # of enrolled infants (who are at least 6 months old and were enrolled between birth and 6 months) |
| Definition of improvement and calculation | Increase in the percentage of infants receiving at least one well-child visit by age 6 months; |

| | **Outcome** improvement between cohort 1 and 2 |
|---|---|
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: infant birth & when child reaches the age of 6 months<br>PAT: when child reaches the age of 6 months<br>HIPPY: N/A<br>SafeCare: when child reaches the age of 6 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Not every recommended well-child visit is tracked to minimize reporting burdens on home visitors and parents and because each program has a different schedule for well-child visits. |

**Benchmark 1-Improved Maternal and Newborn Health;**
***Construct viii: Mother and child health insurance status***

| Performance measure | Percent of mothers and children enrolled in MIECHV who obtain medical/health insurance coverage |
|---|---|
| Target population | 1) Enrolled mothers who are pregnant or have children<br>2) Enrolled children |
| Numerator | 1) # of enrolled mothers with health insurance coverage (Medicaid, SCHIP, private insurance) after six months in the program who did not have coverage at enrollment; PLUS<br>2) # of enrolled children with health insurance coverage (Medicaid, SCHIP, private insurance) after six months in the program who did not have coverage at enrollment |
| Denominator | 1) # of enrolled mothers without health insurance coverage at intake; PLUS<br>2) # of enrolled children without insurance coverage at intake |
| Definition of improvement and calculation | Increase in the combined percentage of mothers AND children that have insurance coverage within 6 months of enrollment; **Outcome** improvement within cohort (intake vs. 6 months) |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months<br>PAT: intake; 6 months<br>HIPPY: N/A<br>SafeCare: intake; 6 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | In Colorado, pregnant women can sometimes be eligible for emergency Medicaid insurance coverage that is only in effective up to 60 days postpartum. We do not expect to |

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| | increase coverage of mothers, but rather only children. Same construct as Benchmark 5, Construct iii. |

Note: For all constructs of Benchmark 2 (Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits), data will be reported overall for the program and broken down by:

- Age category (0-12 months, 13-36 months, and 37-72 months, as appropriate given the population served by the home visiting program)
- For child abuse, neglect or maltreatment, the maltreatment type (neglect, physical abuse, sexual abuse, emotional maltreatment, other).

See end of document for rationale on why improvement is defined as "improving (increase/decrease) or maintaining" the measures.

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**
***Construct i: Visits for children to the emergency department from all causes***

| | |
|---|---|
| Performance measure | Percent of children (between birth and 12 months of age) enrolled in MIECHV who visit the emergency department from all causes |
| Target population | Enrolled children between birth and 12 months of age |
| Numerator | # of enrolled children visiting the emergency department or urgent care for all causes between birth and 12 months of age |
| Denominator | # of children enrolled |
| Definition of improvement and calculation | Decrease or maintain the percentage of children visiting the emergency department or urgent care over time;<br>**Outcome** improvement within cohort (0-6 months vs. 7-12 months of index child's age) |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 6 months; 12 months<br>PAT: 6 months; 12 months<br>HIPPY: N/A<br>SafeCare: 6 months; 12 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | We will report visits in total, but examine this construct in terms of "appropriate" use of the emergency department (ED) internally by tracking reason for ED visit. Appropriate use would be a more reliable performance measure because in some cases injuries or illness not caused by abuse or neglect (e.g. fever, automobile accident) should be treated at the ED. |

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**
***Construct ii: Visits of mothers to the emergency department from all causes***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who visit the emergency department from all causes |
| Target population | Enrolled pregnant women and mothers |
| Numerator | # of pregnant women and mothers visting the emergency |

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|---|---|
| | department for all causes |
| Denominator | # of pregnant women and mothers enrolled |
| Definition of improvement and calculation | Decrease or maintain the percentage of pregnant women and mothers visiting the emergency department over time;<br>**Outcome** improvement within cohort (prenatal-6 months vs. 7-12 months of index child's age) |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 6 months; 12 months<br>PAT: 6 months; 12 months<br>HIPPY: 6 months; 12 months post enrollment<br>SafeCare: 6 months; 12 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | If we could limit this construct to "appropriate" use of the emergency department, this would be a more reliable performance measure because in some cases injuries or illness not caused by abuse or neglect (e.g. fever, automobile accident) should be treated at the emergency department. |

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**

***Construct iii: Information or training of participants on prevention of child injuries***

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|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who receive information or training on prevention of child injuries (e.g. safe sleep, shaken baby syndrome, traumatic brain injury) |
| Target population | Enrolled mothers |
| Numerator | # of mothers receiving information or training on injury prevention during any visit |
| Denominator | # of mothers receiving a completed home visit |
| Definition of improvement and calculation | Increase or maintain the percentage of mothers receiving information or training about injury prevention between cohorts;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Home visit record |
| Measurement tool | N/A |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 1 home visit (every home visit)<br>PAT: 1 home visit<br>HIPPY: 1 home visit<br>SafeCare: 1 home visit |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**
***Construct iv: Incidences of child injuries requiring medical treatment***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who suffer child injuries requiring medical treatment |
| Target population | Enrolled children |
| Numerator | # of enrolled children with injuries requiring medical treatment during the past 6 months |
| Denominator | # of enrolled children |
| Definition of improvement and calculation | Decrease or maintain the percentage of children receiving injuries requiring medical treatment during enrollment months 7-12 versus 0-6;<br>**Outcome** improvement within cohort (0-6 months vs. 7-12 months post enrollment) |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months; 12 months<br>PAT: intake; 6 months; 12 months<br>HIPPY: intake; 6 months; 12 months<br>SafeCare: intake; 6 months; 12 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**
***Construct v: Reported suspected maltreatment for children in the program***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are victims of suspected maltreatment reports |
| Target population | Enrolled children |
| Numerator | # of enrolled children who are victims of suspected maltreatment reports by 6 months post enrollment |
| Denominator | # of enrolled children |
| Definition of improvement and calculation | Decrease or maintain over time the percentage of children who are victims of suspected child maltreatment reports by 6 months post enrollment;<br>**Outcome** improvement between cohort 1 and 2 |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months<br>PAT: intake; 6 months<br>HIPPY: intake; 6 months<br>SafeCare: intake; 6 months |
| Data analysis schedule | NFP: annually<br>PAT: annually |

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| | HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**
***Construct vi: Reported substantiated maltreatment for children in the program***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are victims of substantiated maltreatment |
| Target population | Enrolled children |
| Numerator | # of enrolled children who are victims of substantiated cases of maltreatment by 6 months post enrollment |
| Denominator | # of enrolled children |
| Definition of improvement and calculation | Decrease or maintain over time the percentage of children who are victims of substantiated maltreatment by 6 months post enrollment;<br>**Outcome** improvement between cohort 1 and 2 |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months<br>PAT: intake; 6 months<br>HIPPY: intake; 6 months<br>SafeCare: intake; 6 months |
| Data analysis plan | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that this has previously not been collected by the programs. State (Division of Child Welfare) administrative data will not be used because of concerns that asking participants for a data release may lead to program attrition. |

**Benchmark 2-Child Injuries, Child abuse, Neglect or Maltreatment and Reduction of Emergency Department Visits:**
***Construct vii: First-time victims of maltreatment for children in the program***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are first-time victims of maltreatment |
| Target population | Enrolled children |
| Numerator | # of enrolled children who are first-time victims of maltreatment by 6 months post enrollment |
| Denominator | # of enrolled children |
| Definition of improvement and calculation | Decrease or maintain over time the percentage of children who are first-time victims of maltreatment by 6 months post enrollment;<br>**Outcome** improvement between cohort 1 and 2 |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |

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|---|---|
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months<br>PAT: intake; 6 months<br>HIPPY: intake; 6 months<br>SafeCare: intake; 6 months |
| Data analysis plan | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that this has previously not been collected by the programs. State (Division of Child Welfare) administrative data will not be used because of concerns that asking participants for a data release may lead to program attrition. |

**Benchmark 3-School Readiness and Achievement**
***Construct i: Parent support for children's learning and development***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who receive information on how to support their child's learning and development |
| Target population | Enrolled mothers |
| Numerator | # of mothers receiving information on how to support their child's learning and development |
| Denominator | # of enrolled parents receiving a completed home visit |
| Definition of improvement and calculation | Increase or maintain the percentage of mothers who receive information on how to support their child's learning or development through at least one home visit during a 6-month period;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Home visit record/client file |
| Measurement tool | N/A |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 1 home visit (index child at 6 & 18 months)<br>PAT: 1 home visit<br>HIPPY: 1 home visit<br>SafeCare: 1 home visit |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Information is provided across all ages of children. |

**Benchmark 3-School Readiness and Achievement**
***Construct ii: Parent knowledge of child development and their child's development progress***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who demonstrate increased knowledge of their child's developmental progress |
| Target population | Enrolled mothers |
| Numerator | # of mothers who showed increased knowledge of age-appropriate developmental milestones for their child using model specific measurement tools between baseline (*t*) and follow up (*t* + 12 months) |
| Denominator | # of enrolled mothers whose knowledge of their child's developmental progress was assessed using model specific tools |
| Definition of improvement and calculation | Increase the percentage of parents that report an increase in knowledge about age-appropriate milestones for their child between baseline and follow up;<br>**Outcome** improvement within cohort |
| Data source | Client record |
| Measurement tool | NFP: HOME Inventory; PAT: MIECHV Supplemental Questionnaire; HIPPY: MIECHV Supplemental Questionnaire (Parent Pre / Post Survey); SafeCare Parent Survey |
| Reliability/Validity | See appendix |
| Data collection schedule | NFP: 1 year (index child at 6 & 18 months) |

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|---|---|
| Responsible: home visitor | PAT: 1 year (12 months post enrollment with retrospective question)<br>HIPPY: 1 year (enrollment & 12 post enrollment)<br>SafeCare: 1 year (12 months post enrollment with retrospective question) |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 3-School Readiness and Achievement**
***Construct iii: Parenting behaviors and parent-child relationship***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who gain an understanding of positive parenting behaviors and parent-child relationships |
| Target population | Enrolled mothers |
| Numerator | # of mothers that reported increased understanding of positive parenting behaviors and parent-child relationships using model specific measurement tools between baseline (*t*) and follow up (*t* + 12 months) |
| Denominator | # of enrolled mothers whose knowledge of positive parenting behaviors and parent-child relationships was assessed using model specific tools |
| Definition of improvement and calculation | Increase the percentage of mothers that report an increase in knowledge of positive parenting behaviors and parent-child relationship between baseline and follow up;<br>**Outcome** improvement within cohort |
| Data source | Client record |
| Measurement tool | NFP: HOME Inventory; PAT: MIECHV Supplemental Questionnaire; HIPPY: MIECHV Supplemental Questionnaire (Parent Pre / Post Survey); SafeCare Parent Survey |
| Reliability/Validity | See appendix |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 1 year (index child at 6 & 18 months)<br>PAT: 1 year (12 months post enrollment with retrospective question)<br>HIPPY: 1 year (enrollment & 12 post enrollment)<br>SafeCare: 1 year (12 months post enrollment with retrospective question) |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 3-School Readiness and Achievement**
***Construct iv: Parent emotional well-being or parenting stress***

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|---|---|
| Performance measure | Percent of women enrolled in MIECHV who are screened for |

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| | depression |
| Target population | Enrolled mothers with infants |
| Numerator | 1) # of women in the program that were screened for depressive symptoms at intake; OR<br>2) # of women in the program that were screened for depressive symptoms at 6 months postpartum |
| Denominator | # of enrolled 6 months postpartum women (with a child 6 months old) |
| Definition of improvement and calculation | Increase or maintain the percentage of participating women screened for depression at least once during the 6 months postpartum;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in client record |
| Measurement tool | Edinburgh Postnatal Depression Scale |
| Reliability/Validity | Well established instrument. Additional details available here: http://ihcs.msu.edu/pdf/AppendixF.1-EdinburghUseandValidation.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months postpartum<br>PAT: intake; 6 months postpartum<br>HIPPY: N/A<br>SafeCare: intake; 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Note: Same metric as Benchmark 1, Construct v. Each program has more frequent screenings (not used for benchmark reporting) based on national clinical recommendations for screening schedule. These data can be compared to PRAMS data. |

**Benchmark 3-School Readiness and Achievement**
***Construct v: Child communication, language and emergent literacy***

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|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are screened for communication, language and emergent literacy delays |
| Target population | Enrolled children birth – 6 months |
| Numerator | # of children screened for communication delays by age 6 months or by 6 months post enrollment using ASQ-3 |
| Denominator | # of children enrolled (who are at least 6 months old and were enrolled between birth and 6 months) |
| Definition of improvement and calculation | Increased or maintain the rate of children screened for communication, language and emergent literacy delays by age 6 months or by 6 months post enrollment using the ASQ-3, communication scale;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in visit record |
| Measurement tool | ASQ-3 |
| Reliability/Validity | Well established instrument with details available here: http://www.brookespublishing.com/store/books/squires- |

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| | asq/asq3-technical.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 4 months and specific intervals (4, 10, 14, 20 months)<br>PAT: 6 months of age and every six months interval<br>HIPPY: 6 month intervals beginning age 3<br>SafeCare: 6 months of age and every six months interval |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 3-School Readiness and Achievement**
***Construct vi: Child's general cognitive skills***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are screened for problem solving delays |
| Target population | Enrolled children birth – 6 months |
| Numerator | # of children screened for problem solving delays by age 6 months or by 6 months post enrollment using ASQ-3 |
| Denominator | # of children enrolled (who are at least 6 months old and were enrolled between birth and 6 months) |
| Definition of improvement and calculation | Increased or maintain the rate of children screened for problem solving delays by age 6 months or by 6 months post enrollment using the ASQ-3, problem solving scale;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in visit record |
| Measurement tool | ASQ-3 |
| Reliability/Validity | Well established instrument with details available here: http://www.brookespublishing.com/store/books/squires-asq/asq3-technical.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 4 months and specific intervals (4, 10, 14, 20 months)<br>PAT: 6 months of age and every six months interval<br>HIPPY: 6 month intervals beginning age 3<br>SafeCare: 6 months of age and every six months interval |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 3-School Readiness and Achievement**
***Construct vii: Child's positive approaches to learning including attention***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are screened for learning delays |
| Target population | Enrolled children birth – 6 months |
| Numerator | # of children screened for learning delays by age 6 months or by 6 months post enrollment using ASQ-3 |
| Denominator | # of children enrolled (who are at least 6 months old and were enrolled between birth and 6 months) |

| | |
|---|---|
| Definition of improvement and calculation | Increased or maintain the rate of children screened for learning delays by age 6 months or by 6 months post enrollment using the ASQ-3, personal-social scale;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in visit record |
| Measurement tool | ASQ-3 |
| Reliability/Validity | Well established instrument with details available here: http://www.brookespublishing.com/store/books/squires-asq/asq3-technical.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 4 months and specific intervals (4, 10, 14, 20 months)<br>PAT: 6 months of age and every six months interval<br>HIPPY: 6 month intervals beginning age 3<br>SafeCare: 6 months of age and every six months interval |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 3-School Readiness and Achievement**

***Construct viii: Child's social behavior, emotion regulation and emotional well-being***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are screened for emotional well-being |
| Target population | Enrolled children birth – 6 months |
| Numerator | # of children screened for emotional well-being by age 6 months or by 6 months post enrollment using ASQ-SE |
| Denominator | # of children enrolled (who are at least 6 months old and were enrolled between birth and 6 months) |
| Definition of improvement and calculation | Increased or maintain the rate of children screened for emotional well-being by age 6 months or by 6 months post enrollment using the ASQ-SE;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in visit record |
| Measurement tool | ASQ-SE (Social Emotional) |
| Reliability/Validity | Well established instrument with details available here: http://www.brookespublishing.com/store/books/squires-asq/asq3-technical.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 4 months and specific intervals (4, 10, 14, 20 months)<br>PAT: 6 months of age and every six months interval<br>HIPPY: 6 month intervals beginning age 3<br>SafeCare: 6 months of age and every six months interval |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | |

**Benchmark 3-School Readiness and Achievement**

***Construct ix: Child's physical health and development***

| | |
|---|---|
| Performance measure | Percent of children enrolled in MIECHV who are screened for physical health and developmental delays |
| Target population | Enrolled children birth – 6 months |
| Numerator | # of children screened for physical health and developmental delays by age 6 months or by 6 months post enrollment using ASQ-3 |
| Denominator | # of children enrolled (who are at least 6 months old and were enrolled between birth and 6 months) |
| Definition of improvement and calculation | Increased or maintain the rate of children screened for physical health and developmental delays by age 6 months or by 6 months post enrollment using the ASQ-3, gross and fine motor skills scale;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in visit record |
| Measurement tool | ASQ-3 |
| Reliability/Validity | Well established instrument with details available here: http://www.brookespublishing.com/store/books/squires-asq/asq3-technical.pdf |
| Data collection schedule<br><br>Responsible: home visitor | NFP: 4 months and specific intervals (4, 10, 14, 20 months)<br>PAT: 6 months of age and every six months interval<br>HIPPY: 6 month intervals beginning age 3<br>SafeCare: 6 months of age and every six months interval |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that NFP uses actual measures of head circumference, height and weight. |

**Benchmark 4 Crime**
**Colorado will focus on domestic violence. Therefore, no crime constructs (i. & ii.) are included in the benchmarks plan.**

**Benchmark 4- Domestic Violence**
***Construct iii: Domestic Violence: Screening for domestic violence***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who are screened for domestic violence |
| Target population | Enrolled mothers |
| Numerator | # of mothers screened for domestic violence at intake |
| Denominator | # of enrolled mothers |
| Definition of improvement and calculation | Increase or maintain the percentage of participating women screened for domestic violence at intake;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake<br>PAT: intake<br>HIPPY: intake<br>SafeCare: intake |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that screenings may occur as frequently as every visit (if needed). However, not every screening is tracked to minimize reporting burdens on home visitors and parents and additional screenings are not included for benchmark measurement. |

**Benchmark 4- Domestic Violence**
***Construct iv: Domestic Violence: Of families identified for the presence of domestic violence, number of referrals made to relevant violence services***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who have been identified for domestic violence are referred to services |
| Target population | Enrolled mothers identified for domestic violence |
| Numerator | # of mothers referred to domestic violence services by 3 months post enrollment |
| Denominator | # of mothers identified for domestic violence that remain enrolled in home visitation at 3 months |
| Definition of improvement and calculation | Increased rate of referrals to services for mothers identified for domestic violence;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Home visit record |
| Measurement tool | N/A |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 3 months<br>PAT: intake; 3 months<br>HIPPY: intake; 3 months |

| | |
|---|---|
| | SafeCare: intake; 3 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | For NFP it is clinical practice to refer any client with an identified interpersonal violence (IPV) need. Note that screenings may occur as frequently as every visit (if needed). However, not every screening is tracked to minimize reporting burdens on home visitors and parents and additional screenings are not included for benchmark measurement. |

**Benchmark 4- Domestic Violence**

***Construct v: Domestic Violence: Of families identified for the presence of domestic violence, number of families for which a safety plan was completed***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who have been identified for domestic violence and completed a safety plan |
| Target population | Enrolled mothers identified for domestic violence |
| Numerator | # of mothers identified for domestic violence for whom a safety plan was completed (reviewed, discussed or written) by 3 months post enrollment |
| Denominator | # of mothers identified for domestic violence that remain enrolled in home visitation at 3 months |
| Definition of improvement and calculation | Increased or maintain the rate of completed safety plans for mothers identified for domestic violence;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Home visit record |
| Measurement tool | N/A |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 3 months (Every home visit if needed or indicated)<br>PAT: intake; 3 months<br>HIPPY: intake; 3 months<br>SafeCare: intake; 3 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that screenings may occur as frequently as every visit (if needed). However, not every screening is tracked to minimize reporting burdens on home visitors and parents and additional screenings are not included for benchmark measurement. |

**Benchmark 5- Family Economic Self-Sufficiency**
***Construct i: Household income and benefits***

| | |
|---|---|
| Performance measure | Household earnings from employment for those enrolled in MIECHV |
| Target population | Enrolled adults |
| Numerator | Total monthly household earnings from employment at one year post enrollment minus total monthly household earnings at intake |
| Denominator | Total number of enrolled families |
| Definition of improvement and calculation | Increase or maintain total monthly household earnings from employment from enrollment to one year post enrollment;<br>**Outcome** improvement within cohort |
| Data source | Interview/self-report |
| Measurement tool | See appendix |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; , 12 months postpartum<br>PAT: intake; 12 post intake months<br>HIPPY: intake; 12 post intake months<br>SafeCare: intake; 12 post intake months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Earnings are defined as income from employment. The definition of household is person(s) enrolled in the MIECHV program. |

**Benchmark 5- Family Economic Self-Sufficiency**
***Construct ii: Employment or education of adult members of the household***

| | |
|---|---|
| Performance measure | Percentage of household members enrolled in MIECHV making progress towards an educational goal |
| Target population | Enrolled adults (with an educational goal) |
| Numerator | # of household members demonstrating progress (completed hours or credits) toward an educational goal between intake and one year post enrollment |
| Denominator | # of household members setting an educational goal |
| Definition of improvement and calculation | Increase the percentage of household members with an educational goal enrolled in MIECHV making progress towards that educational goal from intake to one year post enrollment;<br>**Outcome** improvement within cohort |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 12 months postpartum<br>PAT: intake; 12 post intake months<br>HIPPY: intake; 12 post intake months<br>SafeCare: intake; 12 post intake months |
| Data analysis schedule | NFP: annually |

| | |
|---|---|
| | PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Educational goals will be determined by adults enrolled in the program and may include credits toward a GED, high school completion or other certificate or training programs. |

**Benchmark 5- Family Economic Self-Sufficiency**
***Construct iii: Health insurance***

| | |
|---|---|
| Performance measure | Percent of mothers and children enrolled in MIECHV who obtain medical/health insurance coverage |
| Target population | 1) Enrolled mothers who are pregnant or have children<br>2) Enrolled children |
| Numerator | 1) # of enrolled mothers with health insurance coverage (Medicaid, SCHIP, private insurance) after six months in the program who did not have coverage at enrollment; PLUS<br>2) # of enrolled children with health insurance coverage (Medicaid, SCHIP, private insurance) after six months in the program who did not have coverage at enrollment |
| Denominator | 1) # of enrolled mothers without health insurance coverage at intake; PLUS<br>2) # of enrolled children without insurance coverage at intake |
| Definition of improvement and calculation | Increase in the combined percentage of mothers AND children that have insurance coverage within 6 months of enrollment; **Outcome** improvement within cohort (intake vs. 6 months) |
| Data source | Interview/self-report |
| Measurement tool | Parent questionnaire (see appendix) |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months<br>PAT: intake; 6 months<br>HIPPY: N/A<br>SafeCare: intake; 6 months |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Note that this is the same as Benchmark 1, Construct viii. In Colorado, pregnant women can sometimes be eligible for emergency Medicaid insurance coverage that is only in effective up to 60 days postpartum. We do not expect to increase coverage of mothers, but rather only children. |

**Benchmark 6- Coordination and Referrals for Other Community Resources and Supports**
***Construct i: Number of families identified for necessary services***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV who are screened for necessary services |
| Target population | Enrolled mothers |
| Numerator | # of mothers screened for necessary services between intake and 6 months postpartum |
| Denominator | # of enrolled 6 months postpartum women (with a child 6 months old) |
| Definition of improvement and calculation | Increase or maintain the percentage of participating women screened for necessary services* at least once between intake and 6 months postpartum;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of screening in client record |
| Measurement tool | Administrative data |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months postpartum<br>PAT: intake; 6 months postpartum<br>HIPPY: N/A<br>SafeCare: intake; 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | *necessary services clarified through a list in appendix. Note that screenings may occur as frequently as every visit (if needed). However, not every screening is tracked to minimize reporting burdens on home visitors and parents and additional screenings are not included for benchmark measurement. |

**Benchmark 6- Coordination and Referrals for Other Community Resources and Supports**
***Construct ii: Number of families that required services and received a referral to available community resources***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV identified as needing services who received a referral to available community resources |
| Target population | Enrolled mothers with identified needs |
| Numerator | # of mothers identified as needing services between intake and 6 months postpartum who received a referral to available community resources during this time period |
| Denominator | # of enrolled mothers identified as needing services and are 6 months postpartum (with a child 6 months old) |
| Definition of improvement and calculation | Increase or maintain the percentage of participating women with needs for services who receive referrals between intake and 6 months postpartum;<br>**Process** improvement between cohort 1 and 2 |
| Data source | Evidence of referral in client record |
| Measurement tool | Administrative data; interview |
| Reliability/Validity | N/A |

| | |
|---|---|
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months postpartum (and as needed)<br>PAT: intake; 6 months postpartum<br>HIPPY: N/A<br>SafeCare: intake; 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: N/A<br>SafeCare: annually |
| Comments/anticipated challenges | Note that in some less-urban areas available community resources (as targets for referrals) may be limited; these cases will be excluded from the calculation of this construct. Also, referrals may occur as frequently as every visit (if needed). However, not every referral is included for benchmark measurement. |

**Benchmark 6- Coordination and Referrals for Other Community Resources and Supports**
***Construct iii: Number of MOU's or other formal agreements with other social service agencies in the community***

| | |
|---|---|
| Performance measure | Number of social service agencies in communities with which MOUs have been established |
| Target population | Social service agencies |
| Numerator | Number of MOUs with social services agencies |
| Denominator | Total number of sites |
| Definition of improvement and calculation | Increase or maintain the number of social service agencies with which MOUs have been established between site initiation and one year follow up;<br>**Process** improvement within cohort (each implementation site) |
| Data source | Administrative data |
| Measurement tool | MOUs kept at implementation sites |
| Reliability/Validity | N/A |
| Data collection schedule | NFP: site initiation and one-year follow up<br>PAT: site initiation and one-year follow up<br>HIPPY: site initiation and one-year follow up<br>SafeCare: site initiation and one-year follow up |
| Data analysis schedule<br><br>Site administrator/supervisor | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | There may be a short-term (1-2 year) opportunity to increase MOUs. However, after saturation this number will need to be maintained. In some less-urban areas, the available number of social service agencies may be limited, making maintenance an appropriate measure of improvement. |

**Benchmark 6- Coordination and Referrals for Other Community Resources and Supports**
***Construct iv: Number of agencies with which the home visiting provider has a clear point of contact in the collaborating community agency that includes regular sharing of information between agencies***

| | |
|---|---|
| Performance measure | Number of other social service agencies in communities with whom MIECHV sites have a clear point of contact |
| Target population | Social service agencies |
| Numerator | Number of social services agencies with whom sites have a clear point of contact |
| Denominator | Total number of sites |
| Definition of improvement and calculation | Increase or maintain the number of other social service agencies in communities with whom MIECHV sites have a clear point of contact between site initiation and one-year follow up;<br>**Process** improvement within cohort (each implementation site) |
| Data source | Administrative data |
| Measurement tool | N/A |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Site administrator/supervisor | NFP: site initiation and one-year follow up<br>PAT: site initiation and one-year follow up<br>HIPPY: site initiation and one-year follow up<br>SafeCare: site initiation and one-year follow up |
| Data analysis schedule | NFP: annually<br>PAT: annually<br>HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that this information sharing may not be formalized through a MOU. |

**Benchmark 6- Coordination and Referrals for Other Community Resources and Supports**
***Construct v: Number of completed referrals***

| | |
|---|---|
| Performance measure | Percent of mothers enrolled in MIECHV identified as needing services who received a referral to available community resources |
| Target population | Enrolled mothers with identified needs |
| Numerator | # of mothers with a confirmed receipt of referred services between intake and 6 months postpartum |
| Denominator | # of enrolled mothers who received referrals and are 6 months postpartum (with a child 6 months old) |
| Definition of improvement and calculation | Increase or maintain the percentage of participating women who received referrals for whom receipt of services can be verified (between intake and 6 months postpartum);<br>**Process** improvement between cohort 1 and 2 |
| Data source | Home visit record |
| Measurement tool | Administrative data; interview |
| Reliability/Validity | N/A |
| Data collection schedule<br><br>Responsible: home visitor | NFP: intake; 6 months postpartum (and as needed)<br>PAT: intake; 6 months postpartum<br>HIPPY: intake; 6 months post enrollment<br>SafeCare: intake; 6 months postpartum |
| Data analysis schedule | NFP: annually<br>PAT: annually |

| | |
|---|---|
| | HIPPY: annually<br>SafeCare: annually |
| Comments/anticipated challenges | Note that in some less-urban areas available community resources (as targets for referrals) may be limited; these cases will be excluded from the calculation of this construct. Also, referrals may occur as frequently as every visit (if needed). However, not every referral is included for benchmark measurement. |

# Appendix

**Questions used by models in Colorado for construct assessment**

**Benchmark 1: Improved Maternal & Newborn Health**
**i)** ***Prenatal care***
HIPPY: N/A

NFP: Self report on *Maternal Health Assessment, Use of Government & Community Services*
Question: Are you going to a clinic or doctor during your pregnancy?
19. Primary care provider – well client – prenatal care

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Are you receiving prenatal care?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Are you receiving prenatal care?

**ii)** ***Parental use of alcohol, tobacco or illicit drugs***
HIPPY: N/A

NFP: Self report on *Health Habits*
Question: In the last 48 hours, HOW MANY cigarettes have you smoked?

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Do you use tobacco (smoke, chew or dip)?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Do you use tobacco (smoke, chew or dip)?

**iii)** ***Preconception care***
HIPPY: N/A

NFP: Self report on *Use of Government & Community Service Form* and *Demographics: Pregnancy Intake Form*
Question: 20. Primary care provider – well client – postpartum
21. Primary care provider – well client – well-women care

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Have you attended primary care visits within the last 6 months?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Have you attended primary care visits within the last 6 months?

**vi)** ***Breastfeeding***
HIPPY: N/A

NFP: Self report on *Infant Birth Form*

Question: Has your baby ever received breast milk?

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Are you currently, or did you initially try, breastfeeding?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Are you currently, or did you initially try, breastfeeding?

**vii) *Well-child visits***
HIPPY: N/A

NFP: Self report on *Infant Health Care Form*
Question: 1. Have you taken (child's name) for a well-child check-up in the last 6 months?
Yes (If yes, please indicate which of these well child visits were completed; check all that apply)

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Within the last 6 months, have you taken your child to a well-child visit?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Within the last 6 months, have you taken your child to a well-child visit?

**viii) *Maternal and child health insurance***
HIPPY: N/A

NFP: Self report on *Use of Government & Community Service Form*
Question: 13. Medicaid
14. SCHIP (State Children's Health Insurance Program)
15. Private insurance
16. Military insurance (Tricare)

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Do you have health insurance? Does your child have health insurance?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Do you have health insurance? Does your child have health insurance?

**Benchmark 2: Child injuries, child abuse, neglect or maltreatment and reduction of emergency department visits**
**i) *Visits for children to the emergency department from all causes***
HIPPY: Self report on *MIECHV Supplemental Questionnaire*
Has your child gone to the emergency room for any reason within the last 6 months?

NFP: Self report on *Infant Health Care Form*
Question: 10. In the past 6 months, have you **taken** your child to the hospital emergency room/urgent care center for any other reason (excluding injury and ingestion)?
11. In the past 6 months, has your child been **admitted** to the hospital (that is, had to **spend at least one night** there) for an **injury** or because you were concerned your **child swallowed something** harmful?

PAT: Self report on *MIECHV Supplemental Questionnaire*

Question: Has your child gone to the emergency room for any reason within the last 6 months?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Has your child gone to the emergency room for any reason within the last 6 months?

**ii)** ***Visits of mothers to the emergency department from all causes***
HIPPY: Self report on *MIECHV Supplemental Questionnaire*
Question: Have you gone to the emergency room for any reason within the last 6 months?

NFP: Self report on *Demographics: Pregnancy Intake Form* and *Demographics Update Form*
Question: 23. In the past 6 months, have you (client) obtained care at the hospital emergency room for any reason?

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Have you had to go to the emergency room for any reason within the last 6 months?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Have you had to go to the emergency room for any reason within the last 6 months?

**iv)** ***Incidences of child injuries requiring medical treatment***
HIPPY: Self report on *MIECHV Supplemental Questionnaire*
Question: Has your child had any injuries requiring medical treatment? (intake)
Has your child had any injuries requiring medical treatment in the last 6 months?

NFP: Self report on *Infant Health Care Form*
Question: Questions 9-11

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Has your child had any injuries requiring medical treatment? (intake)
Has your child had any injuries requiring medical treatment in the last 6 months?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Has your child had any injuries requiring medical treatment? (intake)
Has your child had any injuries requiring medical treatment in the last 6 months?

**v)** ***Reported suspected maltreatment for children in the program***
HIPPY: Self report on *MIECHV Supplemental Questionnaire*
Question: Have you ever been suspected of mistreating your child?
Has any other adult been suspected of mistreating your child?

NFP: Self report on *Infant Health Care Form* and nurse home visitor observation
Question: 17. Are you aware of any referral of mother/family to social services for abuse or neglect of child since his/her birth?

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Have you ever been suspected of mistreating your child?
Has any other adult been suspected of mistreating your child?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Have you ever been suspected of mistreating your child?
Has any other adult been suspected of mistreating your child?

**vi)** ***Reported substantiated maltreatment for children in the program***

HIPPY: Self report on *MIECHV Supplemental Questionnaire*

Question: Are there any confirmed reports of your child being mistreated either by you or any other adult? (intake)

Within the last 6 months, have there been any confirmed reports of your child being mistreated either by you or any other adult?

NFP: Self report on *Colorado Supplement* and nurse home visitor observation

Question: Are there any confirmed reports of your child being mistreated either by you or any other adult? (intake)

Within the last 6 months, have there been any confirmed reports of your child being mistreated either by you or any other adult?

PAT: Self report on *MIECHV Supplemental Questionnaire*

Question: Are there any confirmed reports of your child being mistreated either by you or any other adult? (intake)

Within the last 6 months, have there been any confirmed reports of your child being mistreated either by you or any other adult?

SafeCare: Self report on *SafeCare Parent Survey*

Question: Are there any confirmed reports of your child being mistreated either by you or any other adult? (intake)

Within the last 6 months, have there been any confirmed reports of your child being mistreated either by you or any other adult?

**vii)** ***First-time victims of maltreatment for children in the program***

HIPPY: Self report on *MIECHV Supplemental Questionnaire*

Question: For any "yes" answers to suspected and substantiated reports of maltreatment, is your child a first-time victim of maltreatment?

NFP: Self report on *Colorado Supplement* and nurse home visitor observation

Question: For any "yes" answers to suspected and substantiated reports of maltreatment, is your child a first-time victim of maltreatment?

PAT: Self report on *MIECHV Supplemental Questionnaire*

Question: For any "yes" answers to suspected and substantiated reports of maltreatment, is your child a first-time victim of maltreatment?

SafeCare

Question: For any "yes" answers to suspected and substantiated reports of maltreatment, is your child a first-time victim of maltreatment?

**Benchmark 3**

**ii)** ***Parent knowledge of child development and their child's development progress***

HIPPY: Colorado HIPPY Parent Pre / Post Survey

Question:

How confident are you that you know the typical stages of development that children go through? (1 – 5 scale with 1 being "Not confident at all" and 5 being "Very confident)

NFP: Nurse observation using HOME Inventory tool—Learning Materials and Involvement scales
Numerator based on: # of respondents where score on Toddler 18 minus score on Infancy 6 > 0

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question:
1) When you began the program, how confident were you that you knew the age appropriate developmental milestones for your child?
2) After having participated in PAT, how confident are you that you know the age appropriate developmental milestones for your child?
(1 – 5 scale with 1 being "Not confident at all" and 5 being "Very confident)
Numerator based on: # of respondents where Q2 minus Q1 > 0

SafeCare: Self report on *SafeCare Parent Survey*
Question:
1) When you began the program, how confident were you that you knew the age appropriate developmental milestones for your child?
2) After having participated in SafeCare, how confident are you that you know the age appropriate developmental milestones for your child?
(1 – 5 scale with 1 being "Not confident at all" and 5 being "Very confident)
Numerator based on: # of respondents where Q2 minus Q1 > 0

**iii)** ***Parenting behaviors and parent-child relationship***
HIPPY Colorado HIPPY Parent Pre / Post Survey
Question:
How confident are you that you know appropriate techniques for disciplining your child?
(1 – 5 scale with 1 being "Not confident at all" and 5 being "Very confident)

NFP: Nurse observation using HOME Inventory tool—Responsivity and Acceptance scales
Numerator based on: # of respondents where score on Toddler 18 minus score on Infancy 6 > 0

PAT: Self report on MIECHV Supplemental Questionnaire
Question:
1) When you began the program, how confident were you in your knowledge of good parenting practices?
2) After having participated in PAT, how confident are you in your knowledge of good parenting practices?
(1 – 5 scale with 1 being "Not confident at all" and 5 being "Very confident)
Numerator based on: # of respondents where Q2 minus Q1 > 0

SafeCare: Self report on *SafeCare Parent Survey*
Question:
1) When you began the program, how confident were you in your knowledge of good parenting practices?
2) After having participated in SafeCare, how confident are you in your knowledge of good parenting practices?
(1 – 5 scale with 1 being "Not confident at all" and 5 being "Very confident)
Numerator based on: # of respondents where Q2 minus Q1 > 0

**Benchmark 4- Domestic Violence**
***iii) Domestic Violence: Screening for domestic violence***

HIPPY: Self report on *Colorado HIPPY Parent Survey*
Question: Are any of the following taking place in your house: (yes / no for each)
Verbal abuse?
Physical Abuse?
Controlling relationships?
Stressful relationships?

NFP: Self report on *Relationship Assessment and Home Visit Encounter*
Question: 1. Since you have been enrolled in this program, have you been emotionally or physically abused by your partner, ex-partner, boyfriend or ex-boyfriend? (Questions1-9)

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: Are any of the following taking place in your house: (yes / no for each)
Verbal abuse?
Physical Abuse?
Controlling relationships?
Stressful relationships?

SafeCare: Self report on *SafeCare Parent Survey*
Question: Are any of the following taking place in your house: (yes / no for each)
Verbal abuse?
Physical Abuse?
Controlling relationships?
Stressful relationships?

**Benchmark 5- Family Economic Self-Sufficiency**
***Construct i: Household income and benefits***
HIPPY: Self report on *Enrollment/Intake Form; Demographics update form*
Question: Indicate yearly household income

NFP: Self report on *Demographics- Pregnancy Intake* & *Demographics Update*
Question: Question 13 (income, source and in-kind benefits)

PAT: Self report on *Enrollment/Intake Form; Demographics update form*
Question: Indicate yearly household income

SafeCare: Self report on *SafeCare Parent Survey*
Question: Indicate yearly household income

***Construct ii: Employment or education of adult members of the household***
HIPPY: Self report on *MIECHV Supplemental Questionnaire*
Question: What are your education goals?
What progress have you made toward those goals (hours or credits)?

NFP: Self report on *Demographics- Pregnancy Intake* & *Demographics Update*
Question: Questions 6-11

PAT: Self report on *MIECHV Supplemental Questionnaire*
Question: What are your education goals?
What progress have you made toward those goals (hours or credits)?

SafeCare: Self report on *SafeCare Parent Survey*

Question: What are your education goals?

What progress have you made toward those goals (hours or credits)?

**Benchmark 6- Coordination and Referrals for Other Community Resources and Supports**

***Construct i: Number of families identified for necessary services***

Note: necessary services include (but are not limited to) the following:

1) Emergency/Crisis intervention (meeting immediate needs for food, clothing, or shelter)
2) Housing assistance
3) Transportation assistance (subsidizing public transportation)
4) Mental Health services
5) English as a Second Language (ESL) training
6) Adult Education (GED programs, College selection)
7) Job training
8) Substance abuse prevention or treatment
9) Child abuse and neglect services
10) Domestic violence services
11) Child support assistance
12) Health education (including prenatal education)
13) Assistance to families of incarcerated individuals
14) Parenting education
15) Marriage education services
16) Dental home resources
17) Medical home resources
18) Medical insurance
19) Vision Specialist
20) Nutritionist

*Further explanations on constructs related to Benchmark 2 from email correspondence with HRSA*
Note that the following changes were approved by HRSA in an August 1, 2012 email.

July 31, 2012
Carification needed on 5, 6, and 7.

Overall, I think that these are rare events for the populations being served by our programs in Colorado. While I don't have hard data to establish a baseline going into this, our state model representatives have confirmed that there are very few cases. The way the constructs are currently defined, they move from rare events (suspected maltreatment) to even more rare events (the subset of suspected cases that are confirmed cases) to extremely rare events (further subset of first-time victims).

So similar to the ED visits, these events are uncommon especially in comparing one 6-month period to another. If there were no cases (suspected, substantiated, first-time victims) in the first period followed by a single visit in the second 6-month period, then we would have failed to meet our performance standard. In our public health performance measures, we refer to this as "the tyranny of small numbers;" any small change looks like a large percentage difference. We generally consider comparisons with fewer than 20 cases as unreliable. I would suggest that the same standard should be applied to these benchmark measures.

Please let me know if you would like to discuss further or need additional information.

Greetings,
Carsten

July 16, 2012
Right now, only B2 C3 (providing information re: the prevention of childhood injuries) says "improve (increase) or maintain" while the other two should as well.

Here's the general answer: As with many of the constructs, we don't have baseline data to know the current level of incidences (mother or child injuries/visits to the ED) or the level of completion in terms of providing information re: the prevention of childhood injuries. Here's my thinking on the individual constructs:

B2 C2 -- Visits of mothers to the ED
I'm guessing this is a fairly rare event, especially in comparing one 6-month period to another. If there were no visits in the first period followed by a single visit in the second 6-month period, then we would have failed to meet our performance standard.
Please change the definition of improvement to "decrease or maintain."

B2 C3 -- Providing information re: the prevention of childhood injuries
Here I think that programs are probably already achieving on the high end, creating a ceiling effect. Therefore, the appropriate measure of improvement is "increase or maintain."

B2 C4 -- Children's injuries requiring medical treatment
Same rationale as the visits by mothers, above. Please change the definition of improvement to "decrease or maintain."

Greetings,
Carsten