

# Conversation with the Division: FAQs



## Healthy Start Webinar: Conversations with the Division of Healthy Start & Perinatal Services

On May 17, 2018 HRSA staff in the Division of Healthy Staff and Perinatal Services facilitated a webinar providing updates on the program, Healthy Start Monitoring and Evaluation Database (HSMED), National Evaluation (presented by Abt Associates), the Healthy Start ColIN and the EPIC Center efforts.

This FAQ summarizes questions raised during the Division call. Questions that were answered during the call are not summarized below but can be heard by listening to the recording or viewing the transcript available at: [the EPIC Center's Training Calendar](#).

### Healthy Start Program Update

Q: We're an April 1 start date, with a question about the performance report. Our evaluator can't find certain sections from the previous format:

- \* Form 9, Performance Measures 50-55 (low and very low birthweight; infant, neonatal, postneonatal, and perinatal mortality)
- \* Section A: Characteristics of Participants, Part E: Live Singleton Births to Participants
- \* Section B: Risk Reduction/Prevention Services
- \* Section C: Major Service Table

Please advise.

A. *Those forms are no longer required.*

*Please refer to Performance report table that were displayed in presentation or contact your project officer*

Q: Regarding the budget update. The April 1 grantees only have enough funding until June. This presents an organizational challenge to keep staff employed per policies. May we receive a formal letter stating that more funds will be provided to at least meet the original Notice of Award for this fiscal so we may continue with staff employment?

A: *The Notice of Award only says: "11. As a result of the federal government's continuing resolution status, this Notice of Award (NOA) reflects a reduced level of funding. As decided upon by the Maternal and Child Health Bureau, this Notice of Award (NoA) provides partial funds at the CR rate of 35.65% of the reduced funding levels (90.7 % of the requested budgets). In accordance with this reduction, funding has been adjusted proportionately across requested cost categories. Up to 25% of the total approved budget may be re-budgeted within approved categories without prior approval."*

Q. Regarding the new Healthy Start Performance report in EHB, can you please provide more instruction on what needs to be filled out specific to Core forms 1-3 and CB4?

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*A. Those forms are no longer required.*

*Please refer to Performance report table that were displayed in presentation or contact your project officer.*

## **Healthy Start Data Reporting**

Q: What is the cutoff for a participant to be enrolled postpartum?

*A. According to the Data Dictionary, the postpartum phase refers to the time period from delivery up until the infant is six months of age. After that point, the participant could be enrolled in the parenting phase.*

Q. Are we held accountable for collecting Demographic Screening Tool forms for participants who left the program prior to receiving IRB approval to move forward with using the Screening Tools?

*A. January 1, 2017 was the date when Healthy Start grantees were required to collect the information included in the screening tool forms. IRB approval was secured at that time. You are being held accountable for participants enrolled as of January 1, 2017, not before that date. However, programs are encouraged to collect Demographic Screening information for those exiting participant prior to January 1, 2017 as much as possible.*

Q. What if a women was “closed to services” (e.g. program staff was unable to connect with her to schedule additional appointments and continue the screening) before Pregnancy History Tool was completed?

*A: If the Pregnancy History Tool is not completed, that participant cannot be “counted” as enrolled.*

Q. If we completed the Demographic Screening Tool for a woman, but she was discharged before we completed the Pregnancy History Screening Tool, can we include her information in our data submission?

*A: No.*

Q. If the Postpartum Tool is completed before 4 weeks how would we capture the postpartum visit, which is supposed to take place between 4-6 weeks?

*A. If the first postpartum visit was conducted prior to 4 weeks, you should complete the “Updated Screening Questions” for postpartum (<http://healthystartepic.org/healthy-start-implementation/screening-tools/>) at a followup visit. See question #33 to update the postpartum visit.*

Q. If a participant becomes pregnant while in the postpartum or interconceptional phase, is the pregnancy history updated? Is the original prenatal screen updated or is a new screening tool created?

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*A. The Pregnancy History is completed only once for the woman so it would not be updated with a change in her status. Since this is a new pregnancy, a new pregnancy screening tool will be completed.*

Q. If we enroll preconception women, how long can they be enrolled? Is there a limit (e.g., we enroll an 18 year old and she does not become pregnant until age 25, would she be in the program for 7 years?)

*A. There is no limit for the length of time a woman can be enrolled in preconception.*

Q. If a participant was served and case managed, but only the Demographic tool was completed (no other screening tools were completed), should she be counted?

*A. No. In order to be counted she must consent to participate in the program, complete the Demographic tool, Pregnancy History and the tool corresponding to whatever perinatal period she is in.*

Q. The Division noted 10th of the month is the first available upload time for monthly data. What is the deadline for aggregate data for the previous month?

*A. The deadline for grantees to complete an aggregate data template is no later than the end of that particular month. Each monthly aggregate reporting continues to start on the 10<sup>th</sup> day of the month for the previous month. For example, on 03/10/2018, a grantee organization will begin to complete an aggregate data template that reports grantee performance throughout 02/01/2018 – 02/28/2018. Refer to page 6 of the [Guide](#).*

Q. For the monthly report aggregate template – does the Division want grantees to add a row each month to show the full YTD data, or do you want us just to report the current month? The aggregate template has a sum at the bottom which makes it look like we must report each month on a different row.

*A. You do not need to add a row each month to show full YTD. You can submit data in the recommended format included in [template](#).*

Q. Can we resubmit 2017 aggregate data? At the beginning of the year, we were unclear which women we would be able to screen and which we wouldn't so all were counted. We did administer it to all new clients in the year

*A. Yes, you can resubmit CY2017 aggregate data, for the entire year (Jan 2017 – Dec 2017). When titling the report template, suggest including “Jan2017 – Dec2017” in the naming convention, to clearly inform that each month’s reported data is included within the report.*

Q. I'm happy we'll be receiving receipts of our data submissions. What will be the turnaround for data receipts?

*A. Aggregate data submission receipts will be sent after review of the email and data report.*

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Q. On the instructions for the aggregate monthly report, Section 1c - it specifically says that, “a woman would move from the pregnant category to the non-pregnant category after delivery.” Has there been a change in this definition? If so, will all programs have to re-submit data to meet this?

A. *Current instructions from section 1c:*

*1.c. Total number of Healthy Start Participants served to date (current calendar year) For all enrolled and active HS participants who received a service within the current calendar year.*

*The enrolled and/or active HS participants include: 1) Pregnant Women, 2) Infants 0-11 months (before the age of 12 months), 3) Children 12-23 months (before the age of 24 months), and 4) Non-Pregnant Women, for the year. This is a total count, meaning at the time of the monthly reporting, report the cumulative number of HS participants enrolled and active, including “new” HS participants, served the entire calendar year. The \*Total (sum of all newly enrolled HS participants) will automatically populate and does not require data entry.*

*NOTE: within a report year, “active” non-pregnant women who become pregnant are to be counted as “Pregnant Women” and subtracted from “Non-Pregnant Women” counts; and “active” infants who become the age of 12 months are to be counted as “Children” and subtracted from “Infants” counts.*

Q. Is there a way to de-identify demographic tools (dummy birthdate?) for clients who did not sign updated consent forms prior to their case closing? We served clients and have their info, but did not have client-level data consent forms until April.

A. *Yes. Those clients who did not sign consent forms who were served and administered forms for, they could be assigned a “dummy birthdate”, per the following instructions provided to all grantees within the Healthy Start Data Announcement - 10/03/2017 email, sent to all Healthy Start Project Directors:*

- Date of Births (DOB): For HSMED upload, client’s date of birth is required for XML files to be submitted successfully while a client’s child’s date of birth is not required. Please note this is the requirement for XML submission to HSMED. HRSA/MCHB requires grantees to collect all information provided in the six screening tools including date of birth. Please make every effort to collect and report DOB. Please review the attached birthdate guideline, corrected implementation guide tool 1, and the change log, for distribution. NOTE: If DOB is not available for certain clients in your organization, please use the “dummy date” (01/01/1901 or 1/1/1901) for uploading these clients into your XML file. If a grantee organization cannot provide a DOB for any of their clients due to HIPPA or data sharing issues, please seek approval, via email, from the Healthy Start Data Mailbox (HealthyStartData@hrsa.gov) including your assigned HRSA PO and HSMED Technical Support (hssupport@dsfederal.com)*

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Q. If we can de-identify, we would be able to upload tools even if there is missing variables? For example, on the question, "How many days/weeks/months did you breastfeed your baby?" The response provided was "6", but "days, weeks, or months" was not selected, so the answer is unclear.

*A. The Division wants the data uploaded and submitted to be complete, therefore submitting this data incomplete would not be acceptable.*

Q. Has HRSA or any site developed an analytic program to analyze benchmarks? (SAS, R, SPSS code) If so would anyone be willing to share?

*A. Healthy Start Rochester developed an Access database in partnership with Onondaga County and can share it with other programs. The database calculates all measures needed for progress, performance and monthly reports. They are still finalizing definitions E-mail the [healthystartepic@jsi.com](mailto:healthystartepic@jsi.com) to get connected to Healthy Start Rochester.*

Q. Sometimes women come to our program with urgent needs that case managers need to work with before administering Screening Tools. Also, sometimes women come in and consent to participate but then are lost to follow-up after a couple of visits. It was our understanding that one point of contact with a woman is what counts to consider her enrolled as a participant. Is that correct?

*A. No. In order to be counted she must consent to participate in the program, complete the Demographic tool, Pregnancy History and the tool corresponding to whatever perinatal period she is in.*