

Frequently Asked Questions (FAQs) from September 23 Webinar

Thank you for attending the Healthy Start Orientation webinar held on September 23, 2014. We received an overwhelming amount of questions most of which are in relation to program requirements, the new Healthy Start Management and Evaluation System (HSMES), JSI responsibilities, and the November Healthy Start convention. Below is information to address many of your concerns.

Healthy Start Requirements (Please consult the Healthy Start FOA for additional details):

1. Since you're being funded for nine months ($\frac{3}{4}$ of one year), we expect you to initially serve a minimum of 375 clients ($\frac{3}{4}$ of 500; including 188 pregnant women), 600 clients ($\frac{3}{4}$ of 800; including 300 pregnant women), or 750 ($\frac{3}{4}$ of 1000; including 375 pregnant women). These clients must be program participants who you are case managing, and who receive the full complement of Healthy Start services. Since men are not being case managed, they do not qualify as clients, although we still expect you to enroll as many male partners as possible.
2. All programs whether new or continuing Healthy Starts must enroll the required amount of participants based on the HS Level you applied to and was approved for.
3. Clients are defined as either pregnant women, women of reproductive age, and infants up to the age of two years. Men do not qualify as clients, although you are expected to enroll as many male partners as possible (see more detail in answer above).
4. "Serve" is defined as providing case management and other service required by your Healthy Start grant. Please refer to the FOA for specifics on the types of services you must provide (Note: this varies depending on Healthy Start Level)
5. All Healthy Start projects were very specifically approved based on the review of your application to serve the population that you outlined in your application. That specified community is what made you eligible to participate. If you go outside of the community proposed in your application, you must still meet what you submitted in your application. If you're not planning on serving who you specified in your application, you will need to justify this change as it's a significant adjustment. If you'd like to expand, please speak with your PO.
6. The Healthy Start FOA states that **"At least 50% of program participants should be pregnant women. Program participants must be case managed and the program must be able to collect data on all program participants."** While it is permissible for you to case manage fathers, they are not counted toward the required number of HS participants you are to serve each year. The majority of your efforts should target women. Men should be reported as community participants.

7. We are still using the multi-level definition of participant, however the majority of your outreach should be focused on recruiting pregnant women and women of childbearing age.
8. In terms of meeting the minimum number of participants to be served each year, HRSA is referring to program participant.
9. According to the Healthy Start FOA program and community participants are defined as follows:

Program Participant: A program participant is defined as an individual having direct contact with Healthy Start staff or subcontractors and receiving Healthy Start services on an ongoing systematic basis to improve perinatal and infant health. Specifically, program participants are pregnant women and women of reproductive age and children up to age 2.

Community Participant: is an individual who attends a Healthy Start sponsored event or participates in consortium activities, etc.
10. As a new Healthy Start grantee, we expect that staff vacancies will be filled prior to the end of this year (December 2014), if not sooner. This will prevent delay in providing proposed services for your Healthy Start program. If you find that you are having difficulty in hiring staff, please alert your Healthy Start Project Officer so they can provide guidance on resolving or addressing this issue.
11. Your Healthy Start program should be fully implemented within the first year of the program (FY2014-15).

National Evaluation and Data Reporting:

1. The Division of Healthy Start and Perinatal Services plans to implement a national evaluation. A contractor for this work has not yet been selected.
2. There are 22 benchmarks provided in the FOA that you'll be required to address in addition to 12 performance measures. While we're getting the evaluation system up and running, we still expect you to provide services to program participants. We'll provide you with the type of information we want to discuss on a monthly basis. It will arrive in a spreadsheet, Access database, or some sort of platform that will make information presentation easy and quick for us to see what work is being done. This will become a part of a larger reporting requirement that will take place once the larger report system is put into place.
3. The benchmarks are not the same as the performance measures. They are collected and reported differently. Additional information will be shared with you in the near future.
4. Healthy Start grantees are expected to be enrolling and providing services now. We understand there is a start-up time, but we expect that you're already working in the community to enroll clients. This data collection requires the presence of a working database. Until ours becomes

available, we will provide you with a spreadsheet or an Access database as an interim step for data collection and input. If you already have a database in place, continue using that, please. Otherwise, please use the aforementioned database we will create and provide for you.

5. The data collection system should be available for use in five to seven months. In the interim, you will receive the Excel spreadsheet from your Project officer. They will provide this form as soon as possible. It must be completed and submitted at least one week prior to your scheduled monthly call.
6. It is our expectation that the HSMES will be able to interface with multiple databases already being used by our Healthy Start programs.

Training provided by JSI:

1. JSI will be working on providing you with a variety of training and technical assistance (TA), and will also be looking at materials they want to make available to you to assist in conducting case management. We are already in the process of looking at what types of curricula can be used for your particular project. In the interim, you are allowed to use any curriculum specified in your proposal.
2. Competencies are defined as the knowledge, skills and abilities needed for an individual to do their job well. In the context of the Healthy Start program, competencies are those basic skills needed by all grantee staff at all HS Levels to provide services. JSI will define core competencies for HS staff at all levels, identify training opportunities, and provide technical assistance to facilitate the implementation of standardized training curricula. Providing standardized staff training across all HS programs will ensure all HS staff have appropriate training and skills to deliver standardized interventions to address the five HS approaches.

November Conference:

1. **Two staff members from each grantee agency are expected to attend the Convention.** Attendance is mandatory for project directors. The other staff member who should attend would ideally be a person responsible for day-to-day coordination of their project and/or training of staff. Reviewing the agenda should provide some insight into the most appropriate second attendee. Please note that only Level 3 grantees are expected to attend the convention on November 18 as they will be participating in the Healthy Start QI Coaching Institute.
2. Requests to have additional staff members attend the Convention will be reviewed on an individual basis. You are authorized to use funds from your Federal Healthy Start grant for two staff to attend this Convention.
3. The hotel for the convention is the Hilton Alexandria Mark Center. A letter providing additional details is forthcoming.

Miscellaneous:

1. Project Directors are asked to contact their assigned Project Officer with questions about terms and conditions stated on your Notice of Award (NoA). You can also call (301) 443-8283 and ask for a Back-up Project Officer or Branch Chief.
2. The Impact report was released over the summer and should have been shared with you via the Project Officer. These emails were also shared with your project director. If you have any specific questions about wrapping up the work for your old Healthy Start grantee please ask your project officer.
3. **This response is only for previously funded Healthy Starts who were successful in this competition.** For questions about no-cost extensions and carryover requests, please contact your assigned grants management specialist listed on your Notice of Award (NoA). You may also ask your Project Officer for this information.