Healthy Start Virtual Grantees' Meeting Deep Dive for Evaluators Breakout Session June 25, 2020

Julie DeClerque: Hello, everyone. Julie DeClerque, HS Triad Baby Love Plus in Forsyth and Guilford Counties of NC

Mary Cronin: Hello all. I'm Mary Cronin, the Data Analyst with Dallas Healthy Start at Parkland Health & Hospital System.

Tracy: Hello, I'm Tracy Golden, Perinatal Manager, Family Solutions Orangeburg, SC

Misha Taherbhai: When the new ones are realeased can the changes be flagged so they are easy

to locate

Sarojini Kanotra: Hello Everyone, this is Sarojini Kanotra from Louisville KY

Kathy Norcott: Hello, Kathy Norcott, Project Director with Piedmont Health Services and Sickle Cell Agency located in Greensboro, NC

Misha Taherbhai: What if we can cannot get a complete tool based on participant coming at various perinatal phase or leaves program before completing programming?

Ah Vang: Will CAREWare mirror all the forms?

Marsha Davis: Hello.... Marsha Davis, Project Director with The Magnolia Project, Jacksonville, FL.

Danielle Chiang: for unique ID, are decimals allowed?

Kristal Dail: If a mother (PP) enrolls and the father as well, does he not have to complete the forms as an "Other Linked Primary Participatant"?

Eulalia Gillum: Is this presentation reflection additional changes to the Standardized Screening Tools that just went into effect on May 15th?..... I wanted to be clear.

Oriana sanchez: Will there be a chance to submit questions about the updates (once they're out) so that you may create an updated FAQs document?

Tim Holbert (he/his/him): Will there be another set of trainings? These are some substantial changes.

Misha Taherbhai: We separated the forms for our male clients into completely different forms as not to confuse the person collecting the data. This is helping our staff.

jaxtell: Do we need to rescreen participants?

Lindsay Bass: Do we need to re-do forms that have already been completed since May 15?

Barvetta Singletary: why was the demographic form removed?

Kathrin Brellochs: Sorry, I may have missed it. Can you please clarify what the vendor meeting is? Is it in regard to CareWare?

SAMSUNG-SM-G935V: when will hamed data dictionary and schema guidelines be released?

lisaolds:So this matches the Annual Unduplicated count reporting

Lindsay Zeman: Can you define "served" for the aggregate report?

Lisa Bain: yay! that is fantastic news to match annual PM denominators.

DYuanna Allen-Robb: Matching the denominators on the HSMES is so much better!

Misha Taherbhai: We do not collect this information every month, so from month to month, this data is roughly the same, until the forms are administered? Is this ok?

Peggy Vander Meulen: The denominator for prenatal are does not make sense. It should be for all women who enrolled prenatally.

jaxtell: We have a lag between when check ups happen and when it is reported to us that it happened. How should we report that?

Misha Taherbhai: If the same person gets pregnant within in the calendar year, do we duplicate her or unduplicate her?

Peggy Vander Meulen: Typo in 3e - ...were ever breastfed OR fed pumped...

Oriana sanchez: last/final 3 months of pregnancy or "3 months prior to giving birth"

Xingpei Zhao: Do the 3. new participants include father?

Lisa Bain: As I understand it, this means that we can rely on the new data collection forms to pull/calculate data directly from them. All forms collected in March = denominators for March. this is very good news if accurate. however, to go back and resubmit data, it would be more reliable to wait until we can enter all of our data collection forms into the systems we are building.

jaxtell: If this isn't the final version, will we have to resubmit all of this again later?

Maxine Reed Vance: why would report date be more important than actual date - in compliance with ACOG guidelines

Misha Taherbhai: Our pregnant numbers decreased due to not enrolling pregnant women into services at the same rate as exited the program while they were pregnant, correct?

Oriana sanchez: Will there be a training or a chance to send questions regarding the data dictionary?

Peggy Vander Meulen: The monthly reporting due date has always sbeen "Starting on the 10th of the month..."

Joy Usigbe: We need to pause on providing reports starting with June 2020 Aggregate report right?

Kathrin Brellochs: I was under the impression that the monthly aggregate report can be submitted between the 10th and the last day of the month.

Varonica Caldwell: Reports are due on the 10th or beginning the 10th to the end of the month?

Patricia McGrane: Is the promised data dictionary in the next few weeks specific to monthly aggregate reporting or for the new data collection tools?

Colleen Ayres-Griffin: we post our report on the EPIC website?

Sara.Suisman@centerstone.org: What will the turn-around time be between receiving new Aggregate instructions/template and submission due date? Will this begin in July?

Ah Vang: Will CAREWare be able to produce data needed for this monthly aggregate report?

Lamikka Samuel: Our project was under the impression that the report can be submitted beginning the 10th of each month thru the end of the month. When did that change?

Peggy Vander Meulen: For Performance Report last year FY budget - d owe include the Maternal Mortality grant funds or only the Healthy Start funds?

Misha Taherbhai: Thank you for clarifying the reporting period - it would be great to have this in the EHBs, because it tends to be confusing every year?

Cynthia Price: Will the calculation of the PPV 4 to 6 week period include the full 6th week which ends day 48 and not just the first day of the 6th week i.e. Day 42?

Jeff Keel: If I have 75 participants enrolled. 72 of claim in the first tool they do not smoke. Should I only track the three who claim they smoke? Someone who does not smoke is considered abstaining?. Please tell us how to track the smokers.

Michele: Could you please go over 4B again?

Misha Taherbhai: Can you go over the unduplicated slide for Total, please?

Lisa Osterman: Why does the HS Site Form Reporting Period say "Current Site" instead of a date range, as is provided for the rest of the forms?

Kristal Dail: Can you please confirm, the Performance Report data should be from April 1, 2019-December 31, 2019?

carrudeb: Do we have to go back nd redo the aggregates?

Kristal Dail: For the most recent Performance Report?

MP Thomas: I second the question about whether we should include maternal mortality funds in the performance report.

Misha Taherbhai: Are the measures in the performance report the same as those we report in the benchmarks for workplan - because it the reporting periods are same, then the data will be the same as in the workplan?

Jeff Keel: The report due the end of this month asks about Food Stamps, Homelessness, Incarceration, Primary Language and CSHCN Children. Will these be on the new tools?

Tim Holbert (he/his/him): This guidance/clarification around date ranges for the NCPR comes 5 days before the report is due. That is not helpful.

Peggy Vander Meulen: To Misha - there are some additional measures in EHB beyond the Benchmarks.

Paul.Frankel@centerstone.org: You keep saying to ask our GPO for slides, trainings, advice, etc. This assumes that a GPO is accessible and responsive. I'm not throwing anyone under the bus, but this is not the case.

Oriana sanchez: As I'm working on the annual report, should we be following the current data dictionary or are we reporting on everyone regardless of the data dictionary? (e.g. when answering about smoking prenatally, is that for all PN participants or only those that started at least 90 days prior to delivery?)

In the past, project officers have sent mixed messages about our reporting. How familiar are they with the data dictionary?

Tim Holbert (he/his/him): Agree with Paul about PO accessibility.

Carol Gagliano: Do you anticipate any more changes to the forms after you sent them out next week.

Misha Taherbhai: Can there be more guidance on how to collect and calculate the spacing measure?

jaxtell: So if the changes aren't available until mid August, should we not submit June data?

Kimberley Broomfield-Massey, PhD: How quickly will this meeting be uploaded, I would love to have your explanation as I am working through the updated aggregated forms

Sara.Suisman@centerstone.org: Should we continue to submit aggregate data until the changes are released?

Cynthia Price: Given the Monthly template revisions, does this mean we do not have to submit the data for June and July until after the revised form is received EXP: August 10th or later.

Linda Littlefield:can we unmute for a question

Colleen Bernard: Hi Linda, yes! I will unmute your line

Varonica Caldwell: **CLARIFICATION PLEASE** Are Aggregate Reports due on the 10th ONLY or beginning the 10th to the end of the month?

Kathrin Brellochs: That is not what we have been told!!!

Paul.Frankel@centerstone.org: Let's say that I am talking to a Mom this month. She says that she had a baby last month. Do I record the baby for this month or re-do the aggregate for last month? Thanks. I am a newbie to HRSA.

Misha Taherbhai: Ok, thanks. However, our numbers don't always increase sometimes they decrease especially during COVID-19?

Lisa Osterman: So will we also list carryover clients in the "new" columns for the months they get their first service, or is the idea that the total unduplicated served will be a different total count that the sum of all the new enrollments?

Varonica Caldwell: Thank you

Xingpei Zhao: What if the participant exists the program some time in this year, do we need keep her in the total number 4.b?

Joy Usigbe: Do you expect grantees to submit June 2020 report starting July 10th, 2020?

Kathrin Brellochs: We were told the report is due between the 10th and the end of the month. And according to this chat, many other grantees were told the same.

Oriana sanchez: Served participants is not the same as participants who have filled out the screening form that aligns with their perinatal phase. We have started to re-think about the way we define enrolled/served participants and having the start/served date be around filing out forms vs. signing our consent as we may inadvertently inflate #s when we are reporting participants who, due to a range of reasons, will never fill out forms. Thoughts?

Colleen Bernard: Kimberely, slides will be uploaded to the EPIC center by the end of next week and the recordings will be posted shortly after. Thank you!

Ah Vang: So all the unduplicated, cumulative counts starts over every calendar year?

Tim Holbert (he/his/him): Agreed we were also told that the aggregate is due after the 10th.

Peggy Vander Meulen: I can say there is absolutely no way we can submit the monthly data report by the 10th. Have never been required to do so before and it is simply not feasible.

Kimberley Broomfield-Massey, PhD: Thank you Colleen

Linda Littlefield: We were told due the 10th but ok by end of month

Misha Taherbhai: may I ask a question on the audio?

Kristal Dail: Please confirm if the data submitted on the most recent performance report should be for CY and not budget year? April-Dec 2019

Julie DeClerque: Is that true for Year 1? Only 9 months?

Carol Gagliano: I missed when you indicated the date the Data Dictionary will be available? Please share that again.

Jennifer Torres: when the revised form is released in mid-August, we will need to recalculate for all previous months in 2020 to meet the new definitions, yes?

Oriana sanchez: It's not so much that Pregnant Women should always be increasing as much as it is that they should never decrease in the aggregate

Ah Vang: I'm not sure if the performance measure can always match the aggregrate---IE. so mom becomes pregnant again, we won't report her tobacco use, her prenatal care entry, her PP visit on the report for Performance Measures?

Kristal Dail: Can I be umuted please? I have a question on the form

Linda Littlefield: I have s question on demographic/race section = it would be nice if we could just unmute ourselves

jaxtell: I have a question regarding the performance report in the EHB forms 3 and 5. There is not a column on the forms to enter the Young Adults (ages 18-25 years). I am needing to know where the best place to enter the amounts for this category would be. We have sent this question to our PO but haven't received a response yet.

Varonica Caldwell: Do you have to have the father's DOB to be an active participant?

Oriana sanchez: @jaxtell, same. I put them in Other (for now)

Patricia McGrane: Count as Other

Misha Taherbhai: I did the same as Oriana!

R. Littleton: can you clarify date range for data on the oerformance report. it is April 2019-Mar 2020

correct?

Debi Michtom: How do we handle same-sex partners?

jaxtell: But they are intercom women served?

Oriana sanchez: Can you speak to the differences between the progress and performance reports?

Michele: Would you please show the slide with the participant definitions again?

Phillip Nunn: Are children reported at their age at enrollment? Otherwise they will change.

Kathrin Brellochs: We are also count them as other! Those categories make no sense!

Lisa Bain: BUT - it means our total #'s will not align. E.g. if we say we served 500 families but are

only reflecting 450 - isn't that a problem?

Rickey G Green: Can you unmute me please

tenrigh2: We count as "Other" as well

Tim Holbert (he/his/him): We put non-pregnant women <25 in the other category rather than that data being lost, same for men.

Oriana sanchez: @Lisa Bain, agreed:/

Varonica Caldwell: **CORRECTION** Do you have to have the father's DOB to be counted as an accompanying participant event though he is participating in classes and with the Fatherhood Coordinator?

Peggy Vander Meulen: There is a place to report <25 year old - it's "Young Adults 18-25" and Adolescents 12-18" on Form 7 and 5

Misha Taherbhai: Lisa - correct. but since we served them we include them in the report. Some of our male fatherhood clients are 17-25 years old

MP Thomas: Is there a "refused" category for ethnicity now?

DYuanna Allen-Robb: Thanks for the Demographic question clarification...it is also cumulative for that month of the people served

Jeff Keel: I would like ask a question and be unmuted please

Lisa Bain: @Phillip - for kids it changes depending on PM for us; e.g. kids were at least 6m by Dec 31 for BF at 6m and reading; kids who were under age 11m for safe sleep;

Xingpei Zhao: I have the same question as MP. Is there a "refuse" or "don't know" for ethnicity now?

Misha Taherbhai: I thought a male is only counted as a PP is only if they are receiving services - not if they are just "there" right?

Phillip Nunn: Thanks, Lisa.

davisjoh: yes because we were told that each child could only have 1 PP corresponding to it

lisaolds:To clarify for Male Participants: Men, who are enrolled with a Primary mother - they are now going to have the PP instead of the AA in their unique ID?

lisaolds:Right MISHA, that's what I understood.

Phillip Nunn: Lisa, How do you count on the aggregate report?

MP Thomas: Re the deadline for aggregate reporting: It has always been STARTING on the 10th of the month. I have a PPT from 2/25/20 that says, "Moving forward, Aggregate Data Reporting resume submissions on the 10th of the month through the end of the month (e.g. submit March 2020 aggregate data 04/10/2020 –04/30/2020).."

Ah Vang: the unduplicated/cumulative counts on a monthly basis is very challenging since client service varies on a monthly basis - its hard to keep track of who you already reported 3 months ago

MP Thomas: I would like to be unmuted to discuss, if possible.

Tim Holbert (he/his/him): I understand that for a male partner to be counted as a Primary Participant, they must be receiving case management services, correct?

Michele: Would please show the participant definition slide again?

Kathrin Brellochs: Correct MP! That's what we were told as well.

Patricia McGrane: If a male partner is participating in a weekly group, does that meet the criteria?

Lisa Bain: I would like to be unmuted for the father as a PP issue

Gracie-Ann Roberts-Harris: Agreed Mary-Powell. We also, received a email with those dates.

Rickey G Green: Agree. That is the way it was originally, anyway

MP Thomas: Thanks! I'll send the PPT to Ada, whose address I have.

Oriana sanchez: If there can be 2 primary participants, how do we choose who will fill out the Parent/Child?

lisaolds: Why 2 primary participants? It is not very clear still

Paul.Frankel@centerstone.org: This is all so confusing! We could do a whole day on these forms and data. Maybe we should do an evaluator's training just on forms and metrics.

Misha Taherbhai: We serve a lot of fathers through a fatherhood program. Not all of them have a wife/partner in services. Especially if they are the primary parent. How should we handle this? They still receive services from Healthy Start, case management and carecoordination, and group health.

lisaolds:What about a grandparent who enrolls with the child they care for - they are a Primary, but not a PN PP or ICC client

lisaolds: And they would complete a parent child form

Misha Taherbhai: oh OK thank you!!

Michele: So, we are collecting information on non-enrolled persons?

jaxtell: What is the difference between the update sections of the tools and completely rescreening clients?

Naomie J: When reporting on breastfeeding initiation, do we record that under the mother, the child or both? Also for breastfeeding at 6 months

Patricia McGrane: So, we can enroll men that are not partners of participants that have an enrolled child. Do they count toward the 100 men?

Maxine Reed Vance: can you please answer the PP visit question asked earlier

LaShonda D. Tate: For a parenting father, would they have to be enrolled at the same location as the child? Or just the program as a whole? For example, if they are in different states, counties, etc.

Kathy Morris: Why wouldn't the grandparent count in the monthly numbers since they are the primary parent?

Kristal Dail: Can I me unmuted please

Carol Gagliano: I realize that the changes are an attempt to clarify things for us and I appreciate that. But I feel obligated to share that we have done a lot of work in our data system using language from the last Data Collections forms released. These changes are more significant than is being said (e.g. the removal of AA and such) and will cause us to do rework. We will do it, of course. The impact on HS grantee needs to be respectfully acknowledged.

Rickey G Green: And that child must be enrolled, correct?

Kimberley Broomfield-Massey, PhD: That is different than what was listed in the RFP

Misha Taherbhai: Do we need to screen every calendar year in addition to the other times?

Kimberley Broomfield-Massey, PhD: The RFP stated that the fathers had to be attached to a mom. When did that change?

Varonica Caldwell: **MEN** What about if the mom is pregnant and does not want to be in program, but dad wants to be in our fatherhood program....Can we still enroll him?

Misha Taherbhai: Thanks Veronica, same question!

Misha Taherbhai: We also face the same situation as Veronica.

Phillip Nunn: Please unmute me.

Varonica Caldwell: Thank you so much!!

lisaolds:Can I be unmuted?

Lisa Bain: @Varonica - there is just 1 program, the Healthy Start program, right? If separating services all staff need to collect same data?

Kathrin Brellochs: I hear you Carol!! It's been frustrating!

Tim Holbert (he/his/him): Agree with carol @carol Gagliano. These changes, while they help clarify, will mean significant retraining. This is a long standing pattern with HRSA.

LaShonda D. Tate: May I be unmuted please

Oriana sanchez: Can you speak to the 2 primary participants scenario in the context of the Parent/Child form?

Also, for those of us who many, many more questions, is the email you shared the best way to reach you? I am not sure that POs are fully equipped to answer all grantee data questions

Tricia Amonette: We count all ages at time of intake

Misha Taherbhai: To the speaker - we calculate the age based on the last encounter date and the

DOB.

jaxtell: What forms need to be redone and on what schedule is that?

Linda Littlefield: This is so hard on the software programers - constant changes

Ah Vang: Maybe the aggregate form can have an initial counts in January and we just report monthly on any new enrollees? there's a lot of confusion about this that I'm concerned we are taking a lot of time to provide data but its not accurate

Tim Holbert (he/his/him): Agree with Linda. We have been working with our IT department for weeks around the forms and design of our data system and have made significant investment in that, now we will have to revise. Will HRSA refund our program the expenses incurred as a result of the changes?

carrudeb: is this power point available now

Colleen Bernard: The slides and recording will be posted to the EPIC website. The slides will be shared by the end of next week and recording shortly after

Jennifer Torres: for monthly reports, we calculate child age based on the last day of the reporting period and the child date of birth. We move them to the child column in the month that they are no longer <12mo. We also keep children in the child column after they age out of services because they were served as a child during the calendar year (so part of the cumulative # served). Clarification on these types of things would be helpful in the data dictionary.

Lisa Bain: Meetings like this are the exceptions to "don't read the comments" rule! Very helpful, thank you all.

Tim Holbert (he/his/him): So, participants in the NOFO can be men who are affiliated with women receiving services but not necessarily receiving services themselves but for the screening tools, the men need to receive services to be counted as a primary participant?

Kori's iPad: Will the chat be made part of the archived transcript for viewing later?

Tim Holbert (he/his/him): Anyone can save the chat. See the three dots to the right of "File" above your chat box.

Health Care Coalition Of Southern Oregon: There was another question about same-sex partners that I don't think it was addressed. The language is about fathers/male partners in the tools. What's guidance around female partners?

Linda Littlefield:Unmute please

Maxine Reed Vance: we have also created assessment forms, care plans, visits assessment, etc for the father's so that we could provide appropriate case msnagement/care coordination because no guidance was previously given, hoping at this point that we captured what is on the tools!

Colleen Bernard: Questions asked in the chat will be compiled into a Q&A document that will be available on the EPIC website

Kimberley Broomfield-Massey, PhD: This is a great conversations

Kimberley Broomfield-Massey, PhD: please do not cut it off, because many of us will NOT ask our PO we will just make assumptions and my fatherhood coordinator needs this info

jaxtell: Is there a schedule for when clients need to be rescreened? Before the intercom screening tool was done at 6mth, 12mth, and 18mth. Is this still true?

carrudeb: How would we link the child to 2 different primaries with out looking like blank or duplicated data on child

Michele: Is there going to be data mapping provided for the PMs as related to the Data Collection Tools?

Paul.Frankel@centerstone.org: I would love a copy of these slides ASAP! Thanks in advance.

Michele: Data mapping related to the responses vs. the question.

Kathrin Brellochs: In our proposal it clearly stated that the 100 fathers would be served by way of case management, groups and workshops. It was not clear that all fathers would have to be case managed to be counted as a father.

Kori's iPad: @Tim, yes, thank you, just wondering if it will be made a part of the official transcript

Phillip Nunn: Thank you, Lina and Ada. Glad that you have thought through a lot of these and are willing to get answers on new issues.

Dr. Jerry Roberson: I like to ask a question

Colleen Bernard: Kori and Tim, the recording and slides will be posted to the EPIC site. The chat will be reformulated into a Q&A document so that it is easier to read through. We will not leave anything out!

Phillip Nunn: Thanks, Colleen, too.

Tim Holbert (he/his/him): Thanks Colleen.

Jeff Keel: I give you high praises for putting on this session and taking the time to answer our

questions. Thanks very much

Misha Taherbhai: Thank you!

Carol Gagliano: Thank you Lina and Ada!

Kori's iPad: Thanks Colleen

Mary Cronin: Thank you for a very informative session!

Yvette: seems that would count as 'number served" but that's a lot of work not to count as an enrolled

father.

Tim Holbert (he/his/him): Thank you Lina and Ada.

Gracie-Ann Roberts-Harris: Thank you

LaShonda D. Tate: This was a great learning experience! Thanks to the presenters and team!

Debi Michtom: This has been helpful; thank you.

Ada Determan: Thank you for your participation & guestions!

Timika Anderson Reeves: thanks for offering a thoughtful session

Patricia McGrane: Can individual programs tailor and add tables?

Tonya Bellamy: ICC women must have a child between 0-18 months correct? Is the 300 count infants/child and ICC women a combined total. For example, if we have 150 ICC women; it is assumed that each woman will have one child (0-18 mos) which will be 150 infants/children. This will give a 300 total count. Will that allow an organization to meet this target goal? Or, do we have to serve 300 ICC women w/children 0-18 months? I hope this question makes sense. Thanks.

Colleen Bernard: Plenary session link: https://nichq.zoom.us/j/92969677300

Paul.Frankel@centerstone.org: Thank you, All!

Marsha Davis: thanks!

Jennifer Torres: thank you!

Ah Vang: thank you everyone

Cynthia Price: Thank you everyone!

Varonica Caldwell: Thank you Ada and Lina