I. Frequently Asked Questions About the Healthy Start Evaluation

General Form Questions

Can I use pen on the forms?

Yes, please only use pens on the forms—pencil doesn't appear dark enough to scan. You may use pens with either black or blue ink on the forms. Be sure to completely fill in the bubble.

Can I fold, bend, use "whiteout", or paperclip the forms?

Yes, although please make an effort to keep forms neat and flat. Forms with too much folding will not run through the scanner and may need to be transferred. White-out does not interfere with scanning.

Can I staple the forms?

No. Forms need to be free of staples to be read by the scanner. Forms that have stapes removed tend to rip and get caught in the scanner.

Can I make notes on the forms?

Yes, as long as you do not mark across any of the "bubbles" or text boxes, BUT **please do not write across the serial number at the bottom, right hand corner of all forms** (with the exception of the first page of the New Baby Questionnaire, which has the serial number on the bottom, left hand corner) **or the over the corner brackets**. Forms will not scan if this number is marked through.

Can I use a Xerox Copy of the forms?

NO. With the exception of the Consent Form (which can be copied) all forms are printed with special scannable software, which will not accept Xerox copies. However, we do encourage you to keep a copy of all forms for your records, sending the original to NPC.

When is it too late to complete a form?

You must fill out forms within 90 days of when the form is due.

How long do I have to mail a form in after completion of that form?

As long as forms were completed within the correct time period (90 days of due date) then you may submit the forms at any time. However, to keep your program's data up-to-date, please submit your data to the administrator at your program within one week of completion. **We strongly encourage programs to submit data to NPC within 30 days of the time the form is complete.**

Common Form Errors

- All forms MUST have complete worker ID, child ID, date of form completion, child's date of birth and program county information. Without this information, the forms are INVALID for the evaluation.

- Please fill in the bubbles *and* the numbers! Bubbles that are under the written numbers must be filled in. Also please double check that you are bubbling in the correct number. **The number written in and the number bubbled below must match exactly.**

- If a family has a subsequent birth, do not forget to enter the new child ID number on the next Family Update item #33.

- Parent Surveys do not always coincide with Family Updates. Parent Surveys are not required at 18, 30, 42, or 54 months.

- **Please make sure to always complete a Parent Survey I and a Family Intake form on every Intensive Service family.** These forms record critical baseline information.

1. Screening, Consent, and OCFF Family Manager Data Entry

How do we get the baby's Healthy Start ID number?

If the family agrees to participate in Healthy Start and its program evaluation (the first check box option on the Welcome to Healthy Start Consent Form) you should enter the client information in the OCCF Family Manager to obtain an ID number.

The OCCF Family Manager database assigns a Healthy Start ID number to the baby's record after data entry. This can be done either pre- or postnatal. The information you should enter into the OCCF Family Manager is the same information collected on the consent form. For more information on the OCCF Family Manager, contact occfwebsupport@fc.state.or.us**.**

It is important to write the baby's ID number on the family's consent form, and/or to keep a list of ID numbers and family names for families who consented to the screen and completed the New Baby Questionnaire. After data entry, the Healthy Start ID number should be added to the child/family's chart so it can be used when sending required data to NPC for the Healthy Start Evaluation.

Be sure to record the child's ID number on the consent form, and keep a copy for your program records. **You must include the child's ID number on each and every form you complete.**

Should we enter people who refuse to participate in the program evaluation into the OCCF Family Manger?

Yes. If a family agrees to participate in Healthy Start, but not the evaluation (the second check box option on the Welcome to Healthy Start Consent Form) you should still enter the client's information into OCCF Family Manager (the OCCF Family Manager is for program documentation). However, you should indicate that they did not agree to the program evaluation by selecting the appropriate consent field in the Family Manager. Information about these families will NOT be provided to NPC. NPC will request from programs the number of documented refusals to share information at the end of the fiscal year.

Should we enter people who refuse services (are not interested in Healthy Start) into OCCF Family Manager?

That depends. If a family declined any service from Healthy Start (the third check box option on the Welcome to Healthy Start Consent Form) keep documentation of these families for your own records, but do not enter them into the OCCF Family Manager. At the end of each fiscal year, you can submit the number of families who declined service to NPC Research for inclusion in your reach rates.

2. Prenatal Services

What do we do if we serve a family prenatally?

Families served prenatally can be entered into the OCCF Family Manager database. You should also enter as much information as possible on the baby. If you do not know the baby's name, you can put a zero in that field. For the date of birth, you should enter the estimated date of birth for the child, and on the field for "birth type" you should pick "estimated." Entering this information will allow you to obtain an ID number on the child so that you can include it on the NBQ and send it to NPC (you no longer need to wait until the baby is born to send in the NBQ). **Once the baby is born, you will need to edit the child's information, replacing the estimated date of birth with the actual date of birth, as well as updating name and gender fields (in Family Manager), if necessary**.

If a prenatal family is participating in **Intensive Services**, please complete the first part of the Family Intake form during the prenatal period, and keep this form in the child's file. When the baby is born, complete the second half of the Family Intake and send it to NPC (these instructions are also printed on the Family Intake form).

What if we serve a family prenatally and they drop out of the program before the baby's birth?

If you served the family prenatally and obtained an ID number through the OCCF Family Manager, you should send in an exit form on that child.

However, if you did not obtain an ID number through the OCCF Family Manager database for the client, you should include that family in your count of families served prenatally, but who exited before the birth of the baby (and before an ID number was obtained), to NPC Research for inclusion in your "reach rate." This information will be requested by NPC at the end of the fiscal year.

3. Twins/2nd Births

What do we do if the family has twins?

Enter both children into the OCCF Family Manager database and record their ID numbers. Choose the ID number of the first-born child as a tracking number for the family and submit all subsequent information using that target child's ID number. The other twin's ID number should be reported on item "C" of the New Baby Questionnaire (under the "Program Use Only" section). Child-specific data, such as the ASQ, will be collected for both children, but only reported for the firstborn twin.

What about screening a second child born to a family already receiving Intensive Service?

You do not need to re-screen the family. However, you should get a new ID number for the sibling from the OCCF Family Manager database. Record the new sibling's ID number on item 33 of the next Family Update form you complete for the target child.
As a reminder, evaluation forms should only be submitted for the first-born child—do not submit evaluation forms (Family Intakes, Family Updates, etc.) for the additional sibling(s).

4. NBQ and Eligibility for Services

How do I record eligibility for services on the NBQ?

If the NBQ results in a negative screen, fill in the bubble, "Not eligible (negative screen)".

If the NBQ results in a positive screen, you will choose one of the bubbles below "Eligible (positive screen, mark one below)" indicating whether the family is interested, declines, or is not offered IS (the latter should be used ONLY if the family is already enrolled in another program similar to Healthy Start)
If the NBQ results in a positive screen and the family is "Interested if available", you must do one of two things: 1) Complete and submit a Family Intake to verify that a first home visit was completed, OR 2) if a first home visit was not completed, you must complete and submit an Exit Form, selecting the "Reason for Exit" under "Family never completed home visit".

Important! All families who have "interested if available" checked on the NBQ must have either a Family Intake or an Exit form submitted to NPC Research.

5. Kempe

Do I need to submit a Kempe form for every family?

Every family who receives a first home visit with Intensive Services should have a Kempe form submitted.

How do I complete the Child's Date of Birth section for a prenatal screen?

Leave the date of birth section blank and send the Kempe to NPC Research.

6. Family Intake and Parent Survey I

What forms do we fill out if an Intensive Service family enters the program when the target child is older than 1 month?

Remember that HFA standards encourage screening and enrollment during the first month after the baby's birth. However, in the rare case where a family is enrolled after this time, you will still enter the family into the OCCF Family Manage database to obtain an ID number. You should also fill out a Family Intake form as well as Parent Survey I (regardless of age of the child, as these forms establish the "baseline" for a child entering the program). If a child is enrolled when s/he is over 3 months old, you may **skip** the 6-month Family Update and Parent Survey II. Wait until the child is 12 months old to fill out the Family Update and Parent Survey II.

When completing the section on family service needs and resources, should I answer based on what I think the family needs, or what the family says they need?

The purpose of this section is to identify family issues and track how Healthy Start is responding to them. For this reason, it is important for you to use your best judgment as a skilled home visitor to indicate what you believe the family needs to thrive, regardless of whether the family acknowledges the need. For example, a family may not acknowledge the need for drug/alcohol services, but if it is your informed opinion that the family needs these services to thrive, please indicate that the family needs this service.

What if the parent refuses to do the Parent Survey?

Parent Survey forms are voluntary. Let the parent know that participation is voluntary. Tell the parent: "Answering the questions will help us plan better programs for you and other parents. But whether you answer the questions or not will not affect your eligibility to continue to receive Healthy Start services." If a parent refuses to complete the Parent Survey, home visitors should complete the bottom of the form (which includes the reason for not completing the form) and submit to NPC.

What if the family has two parents/caregivers who would like to fill out the Parent Survey forms separately?

Tell both parents/caregivers to fill out the forms. When you (the home visitor) receive the surveys from the parents, then you must decide which parent is the primary caregiver, or most involved with the Healthy Start program, and send in that parent's/caregiver's form to NPC Research (you can retain the other parent's form for your records). You should always send in Parent Surveys from that same parent in the future so that the same parent is tracked over time.

7. Family Intake & Update

When do I submit a Family Update if the Family Intake was done late (e.g., when baby was over one month old)?

The general rule is that you should submit all forms based on the child's birth date, regardless of when the prior form was submitted. So if the Intake was completed when the child was 2 months old, submit a Family Update at the child's 6-month birth date. However, if the Family Intake was completed when the child was over 3 months old, skip the 6-month Family Update, and wait until 12 months (see question # 4).

If the baby is born premature, what date do I base the ASQ on (the developmental or birth date)?

Always use the baby's date of birth as the basis for indicating ASQ and Family Update months on the Family Update. You may use adjusted scoring guidelines on the ASQ as applicable.

I connected a family I'm providing home visits to with education assistance early in the first month of service, prior to completing the Family Intake form. Should I indicate this as "service currently used" since I've already connected them or "family lacks needed service" since they lacked the service at the time of their Healthy Start enrollment?

If the family member lacked the needed service prior to their enrollment with Healthy Start, you should indicate, "family lacks needed service" on the Family Intake, despite the fact that you may have already started this connection to service. However, on the subsequent Family Update (item #11) you should mark "Yes" that the family "lacked the needed service since the last Update/Intake" and indicate that "Yes" the family was connected to the service, even if you weren't the one who connected them.

8. Parent Surveys I and II (A and B)

Page 1 of the Parent Survey I and Parent Survey II (A and B) gives "language barrier" as an option for indicating why the survey was not completed. Does this mean that we don't have to administer these survey forms to families that don't speak English or Spanish (for example, if they only speak Russian)?

That is correct. We will not survey families that cannot understand what we are asking, whether that is because they speak a language that we do not have a form translated in or because of a developmental disability. However, every effort should be made to translate or interpret for the parent so that s/he can complete at least the Parent Survey I and Parent Survey 2A.

9. Exit/Re-Entry

Do we need to send an Exit/Re-entry form when a family changes workers?
No. You should not fill out an exit/re-entry form if a family switches a family support worker. The first time the new worker sends in a data form with their worker identification number on it our system will automatically update the worker for that family in our database.

There's no place to exit subsequent births or twins anymore – what should we do?
Siblings and twins no longer require an exit form. For subsequent births, enter the child's information into the OCCF Family Manager database to obtain an ID number. Enter this ID number on the Family Update form. For twins, indicate that it was a "multiple birth" on item C of the New Baby Questionnaire, and enter the twin's ID number.

What time period do I report for families who were previously in Healthy Start, and now are exiting for <u>a second time</u>?
Record only the time period for the second series of program services. The services for the first time the parent was in Healthy Start have already been recorded.

If a family meets their family goals but the child is exited prior to their third birthday, do I mark the reason for exit as, "Child reached age limit of program"?
No, mark "Other" as the exit reason and indicate "Excellent progress" on the Family's Status at Exit. Only use the exit reason, "Child reached age limit of program" if child is 3 (or 5 depending on your program) at the time of exit.

10. Creative Outreach

Do I need to fill out an exit form when I place a family on creative outreach?
No. You only should fill out an exit form when you are ending unsuccessful creative outreach on that family (typically after 90 days), or if during the creative outreach process you locate the family and they refuse further Healthy Start services.

I've been unable to reach a family on my caseload. I've tried a variety of ways to locate them, but have been unable to do so for over 90 days now. How will the evaluation and program know that I tried to locate this family for 3 months after my last visit with them, and that I didn't just "do nothing"?
The exit form you complete for the family will document your attempts to locate the family. Under "Service Information" on the exit form, you should indicate (1) the dates of your first and last home visits with the family, (2) the date you placed the family on creative outreach (typically this can be the first date you unsuccessfully tried to contact them, and (3) the date you are ending creative outreach (which should be at least 90 days after the start of creative outreach). If you are unsure as to the reason why the family has disengaged and aren't comfortable choosing from the options listed on the Exit form, bubble "Other" and explain

that the family has ended Creative Outreach and the reason is unknown. However, please try your best to determine that family's reason for disengagement.

The case file you keep on that family should include documentation of creative outreach attempts. These files should be housed at your program office—you do not need to send this documentation to the evaluation team.

After a couple months of having a family on creative outreach, I've successfully reengaged them in service. Do I need to fill out a re-entry form?
You do not need to complete a re-entry form for clients you re-engaged during the creative outreach process, since they hadn't been formally exited. On the next Family Update that you complete, indicate on question #4 how many days the family was on creative outreach. If you mistakenly exited a family, please let the evaluation know.

A family I'm serving was on creative outreach when their last Family Update and parent survey were due. Should I complete it upon their reengagement in the program? Do I need to redo an Intake form?
Continue to do evaluation forms based on the child's age and evaluation manual recommendations even though you are not providing home visits to this family. On the next Family Update you complete, indicate how many days the family was on creative outreach since the last completed Family Update (see question # 4). You do not need to do a new Family Intake for this family.

11. Rates of Abuse and Neglect

Are the Healthy Start screened/referred families (those not receiving on-going home visiting services) being tracked for their rates of abuse and neglect?
Yes, we report this information in the annual Healthy Start of Oregon Status Report, if they consented to the program evaluation.

Is the only way you track the rates of abuse and neglect for Intensive Service families through the Family Updates?
We do ask some questions on the Family Intake and Updates about services received or pending cases on the family through Oregon Department of Human Services, Children, Adults, and Families Division (CAF). However, we get information on actual founded abuse cases through a data sharing agreement with OCCF and CAF.

How does Healthy Start measure/evaluate if child abuse is reduced in their population?
NPC sends a list of the Healthy Start ID numbers for all Healthy Start families to OCCF. OCCF adds identifying information to each family's ID number, and forwards the information to CAF. CAF then matches these families with any confirmed cases of child maltreatment, and sends de-identified data back to NPC. CAF also provides NPC with data about the number of confirmed cases of child maltreatment for non-served families with children aged 0–2 in the same counties. CAF never releases families' names. All data NPC receives is by Healthy Start ID number.

12. Miscellaneous

Does NPC Research have any direct contact with screened/referred families or Intensive Home Visiting families?

No. NPC Research uses information that is sent to us from the Healthy Start programs and information that we receive through the OCCF Family Manager database.

Do we need to notify the evaluation if the family changes workers?
No. There is no need to notify the evaluation because this will change automatically in our database when the next form for the family is received with the new worker's ID on it.

When are trainings for the HOME held and by whom?
HOME trainings are held on an as-needed basis, as we feel it is important for workers to understand the tool as best they can. However, funding limits the number of trainings that can be held. A HOME training video/DVD was distributed to all sites at the July 2004 Quarterly Managers Meeting. Additional copies can be requested directly from NPC Research, (503) 243-2436.

When are trainings for the Healthy Start Evaluation and forms held and by whom?
You will receive orientation to the evaluation forms by your program. In addition, a Healthy Start Evaluation DVD was distributed to all programs in September 2007. Additional copies can be requested directly from OCCF.

To whom should I direct program related questions such as enrollment, service level assignment, number of home visit required, and/or when to exit a family from service?
Direct these questions to Karen Van Tassel at the OCCF office at (503) 378-5120 or karen.vantassell@state.or.us.