

## **Optional Tool for the Measurement of Coordination and Referral Benchmark Constructs**

### ***Background***

This measurement tool has been developed for adaptation and use in part or in whole by home visiting programs to track their progress in coordination and referral with outside services and resources for enrolled families. The tool may be used by any home visiting program that is interested in tracking its progress in improving coordination and referral for families they serve or programs they fund.

One set of programs that may choose to use this tool are grantees in the Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program, who may find it useful for creating performance indicators for quality improvement efforts or for defining benchmarks for federal reporting purposes. “The coordination and referrals for other community resources and supports” [SEC. 511 (d)(1)] is one of six areas in which the ACA expects grantees to establish, track, and periodically report on benchmarks for families who are enrolled in home visiting programs. The other five benchmark areas are Maternal and Newborn Health; Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits; Improvements in School Readiness and Achievement; Crime or Domestic Violence; and Family Economic Self-Sufficiency.

The measurement tool attached here is designed to collect information about coordination and referrals specifically with respect to services that might help families enrolled in home visiting programs to make progress on outcomes in the five other benchmark areas. However, home visiting programs coordinate with many types of service providers, and state and local organizations can adapt this measurement tool to collect information about coordination and referrals with any services in their communities in which they have an interest.

Although MIECHV grantees are not required to use this document, we hope that many find it useful.

### ***Directions for filling out the measurement tool***

The attached summary table lists a number of coordination and referral indicators and their descriptions. There are five sections, some of which have sub-categories.

- Section 1: Agreements and Points of Contact Between Home Visiting Program and Agencies in Community
- Section 2: Adult and Pediatric Health Care and Access
- Section 3: Domestic Violence Services
- Section 4: Other Services for Children
- Section 5: Other Services for Adults

In a given reporting period, a home visiting program, administering agency, or grantee that uses this tool will fill out the counts or percentages listed for some or all of the individual items

provided under each section. It is assumed that the data and information used to populate these items will be collected at the local program level, and then aggregated at the state, grantee, or funder level for a particular time period (for example, a fiscal quarter or a fiscal year). The methods used to collect and aggregate the data will vary depending on the organization's management information systems, databases, or other tracking systems.

An electronic version of the tool will be provided so that organizations can customize it for their own purposes. Before setting up a process for collecting the information in this tool, the organization will need to make two decisions about customizing the tool:

*Which rows in this tool are important to track, given this organization's priorities and service context?*

The Coordination and Referral Benchmark requirements, as described in the Supplemental Information Request for the Submission of the Home Visiting Updated State Plan (the SIR guidance), are:

- Number of families identified for necessary services;
- Number of families that required services and received a referral to available community resources;
- MOUs: Number of Memoranda of Understanding or other formal agreements with other social service agencies in the community;
- Information sharing: 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;
- Number of completed referrals (i.e., the home visiting provider is able to track individual family referrals and assess their completion, e.g., by obtaining a report of the service provided).

In Appendix A, we list items from this tool that could be used to fulfill each of these requirements.

Other benchmark areas also require items related to coordination and referral of services. To assist states in completing these items, we have included them in the attached tool. Appendix B lists several constructs required in other benchmark areas, and identifies where these data can be found in the Coordination and Referral tool.

Organizations may choose to eliminate items in this tool that are not required as part of any benchmark reporting or are not relevant to their service context or not needed for their management reporting.

*Is there additional information that would be helpful to add to this tool, given this organization's priorities and service context?*

Organizations may choose to add some items or elements to this tool. This might be helpful, for example, if there are additional services to which the home visiting program provides coordination and referrals, or if additional performance indicators about particular aspects of the coordination and referrals process would be helpful in a continuous quality improvement process.

*A note concerning dates*

To use this measurement tool effectively, local programs will need to collect the relevant data on actions taken for individual families in their programs. No matter what type of system local programs use to collect this information (management information system, paper and pencil forms, etc.) it will be important to record not only the relevant actions taken (enrollment of the family, referral to a particular service, or the receipt of a particular service, for example) but also the date on which the action occurs. This will make it possible to report the actions taken within a particular time frame as well as to track the length of time between different actions, such as screenings, referrals, and service actually received.

| <b>Basic Program Information</b> |                             |               |  |
|----------------------------------|-----------------------------|---------------|--|
|                                  |                             | <b>Number</b> | <b>Definition</b>  |
| 1                                | Number of enrolled families |               | Report the unduplicated number of families enrolled in the program during the reporting period, counting each family only once (even if a family exited and re-entered the program during the reporting period). Include both new clients as well as those who were receiving ongoing services.  |
| 2                                | Number of enrolled children |               | Report the unduplicated number of infants or children aged birth through kindergarten entry enrolled in the program during the reporting period, counting each child only once (even if a family exited and re-entered the program during the reporting period.) Include both new clients as well as those who were receiving ongoing services.  |
| 3                                | Number of enrolled adults   |               | Report the unduplicated number of parents, guardians, or caregivers, including pregnant women, enrolled in the program during the reporting period, counting each only once (even if a family exited and re-entered the program during the reporting period.) Mothers less than 18 years of age who are enrolled in the program can be counted as adults for purposes of this tool. Include both new clients as well as those who were receiving ongoing services. |

**Section 1. Agreements and Points of Contact Between Home Visiting Program and Agencies in Community**

|      | List services for which your organization has identified a need                                     | Number of Memoranda of Understanding (MOUs) or other formal agreements the home visiting program has with outside organizations that provide this service | Do you have internal resources to provide this service? (Y/N) | Number of social service, health, or other local community organizations and agencies providing this service and with which the home visiting program has a clear point of contact for information sharing (with or without a formal MOU). A clear point of contact is an individual person who is designated to communicate with or receive communications from staff at the home visiting program |
|------|---|---|---|---|
| 4a   |   |   |   |   |
| 4b   |   |   |   |   |
| 4c   |   |   |   |   |
| 4d   |   |   |   |   |
| 4e   |   |   |   |   |
| 4f   |   |   |   |   |
| etc. |   |   |   |   |
| 5a   | Total number of MOUs or other formal agreements with other social service agencies in the community | TOTAL:  | N/A   | N/A   |
| 5b   | Total number of unduplicated agencies with which your organization has a clear point of contact     | N/A   | N/A   | TOTAL:  |

## Section 2. Adult and Pediatric Health Care and Access

| A. Prenatal Care |  | Number or Percent | Definition  |
|------------------|--|-------------------|---|
| 6                | Number of women known to be pregnant   |                   | Report the unduplicated number of women who either entered the program pregnant or were identified as pregnant at any point during the reporting period.  |
| 7                | Number of pregnant women who already had a source of prenatal care                                     |                   | Report the total unduplicated number of: 1) pregnant women who already had a source of prenatal care at time of program enrollment; plus 2) women who became pregnant during the reporting period and already had a source of prenatal care when their pregnancy was made known to the program.   |
| 8                | Number of pregnant women who did not already have a source of prenatal care                            |                   | Report the total unduplicated number of: 1) pregnant women who did not have a prenatal care provider at time of program enrollment; plus 2) women who became pregnant during the reporting period and did not have a prenatal care provider when their pregnancy was made known to the program. This number should equal the count in #6 minus the count in #7.   |
| 9                | Number of pregnant women referred to prenatal care   |                   | Consider only the women reported in #8. Report the number of these women referred for prenatal care. A referral is defined, at a minimum, as providing the family information on how to schedule visits at available prenatal care sites. It may include referrals to prenatal services provided by the home visiting program. It may include the home visitor calling the provider to set-up a prenatal appointment. |
| 10               | Percent of pregnant women in need of care who were referred to prenatal care                           |                   | Calculate the percent as: $(100 \times \#9) / \#8$ .  |
| 11               | Number of referred pregnant women who initiated prenatal care  |                   | Consider only the women reported in #9. Report the number of these women for whom the program verified receipt of at least one prenatal care visit. The reporting period may need to extend one to two months beyond the date of the last referral so as to confirm how many women initiated prenatal care.   |
| 12               | Percent of referred pregnant women receiving prenatal care   |                   | Calculate the percent as: $(100 \times \#11) / \#9$ .   |
| 13               | Number of pregnant women who have received all recommended prenatal visits since enrollment in program |                   | Consider all pregnant women enrolled in the program. Report the number of these women for whom the program verified (verification can be obtained by asking the pregnant client) receipt of all recommended prenatal care visits.   |

## Section 2. Adult and Pediatric Health Care and Access (cont.)

| A. Prenatal Care (cont.) |   | Number or Percent | Definition  |
|--------------------------|---|-------------------|---|
| 14                       | Percent of pregnant women who have received all recommended prenatal visits since enrollment in program |                   | Calculate the percent as: $(100 \times \#13) / \#6$ . |

| B. Adult Primary Care |  | Number or Percent | Definition  |
|-----------------------|--|-------------------|---|
| 15                    | Number of enrolled adults who already had a regular source of care                                       |                   | Report the unduplicated number of adults identified as already having a regular source of care and, therefore, not in need of referral (verification can be obtained by asking the adult). A regular source of care may be defined as the place the adult usually goes for preventive and illness-related care. Do not include adults whose regular source of care was an urgent care clinic or emergency department. |
| 16                    | Number of enrolled adults who did not already have a regular source of primary care                      |                   | Report the unduplicated number of adults without a verified regular source of care as defined in #15. This number should equal the count in #3 minus the count in #15.  |
| 17                    | Number of adults referred to a regular source of care  |                   | Consider only the adults reported in #16. Report the number of these adults referred for regular care. A referral is defined, at a minimum, as providing the family information on how to schedule visits at available primary care sites. It may include referrals to regular care services provided by the home visiting program. It may include the home visitor calling the provider to set up an appointment.    |
| 18                    | Percent of adults in need of care who were referred to a regular source of care                          |                   | Calculate the percent as: $(100 \times \#17) / \#16$ .  |
| 19                    | Number of adults referred to a regular source of care and successfully accessed a source of primary care |                   | Consider only the adults reported in #17. Report the number of these adults referred for regular care and who now report having a regular source of regular care.   |
| 20                    | Percent of referred adults who now have a regular source of care   |                   | Calculate the percent as: $(100 \times \#19) / \#17$ .  |

## Section 2. Adult and Pediatric Health Care and Access (cont.)

| C. Adult Behavioral Health Care |  | Number or Percent | Definition   |
|---------------------------------|--|-------------------|--|
| 21                              | Number of adults who were screened for any behavioral health care need |                   | Report the unduplicated number of adults screened for mental or behavioral health care needs. Behavioral health needs, and their screening tools, may include psychological, substance use, or other individual or family mental or behavioral health needs. Do not include tobacco screening.   |
| 22                              | Number of adults who were screened for depression                      |                   | Report the unduplicated number of adults screened for depressive symptoms or depression. (This count is a subset of adults counted in #21 above.)  |
| 23                              | Number of adults who were screened for substance abuse                 |                   | Report the unduplicated number of adults screened for substance abuse problems. Do not include tobacco screening. (This count is a subset of adults counted in #21 above.)   |
| 24                              | Percent of adults screened for behavioral health needs                 |                   | Calculate the percent as: $(100 \times \#21) / \#3$ .  |
| 25                              | Percent of adults screened for depression                              |                   | Calculate the percent as: $(100 \times \#22) / \#3$ .  |
| 26                              | Percent of adults screened for substance abuse                         |                   | Calculate the percent as: $(100 \times \#23) / \#3$ .  |
| 27                              | Number of adults referred to a source of behavioral health care        |                   | Report the number of these adults referred to behavioral health care. A referral is defined, at a minimum, as providing the adult information on how to schedule visits at available behavioral health care sites. It may include the home visitor calling the provider to set up an appointment. It may include referrals to services provided by the home visiting program. Behavioral health care services may include, for example, a primary care physician, social worker, psychologist, psychiatrist, mental health clinic. |
| 28                              | Number of adults referred to services to treat depression              |                   | Report the number of these adults referred to services for depression. It may include referrals to services provided by the home visiting program. Depression health services may include, for example, a primary care physician, social worker, psychologist, psychiatrist, mental health clinic substance abuse treatment facility, or peer-supported program.   |



## Section 2. Adult and Pediatric Health Care and Access (cont.)

| C. Adult Behavioral Health Care (cont.) |   | Number or Percent | Definition  |
|---|---|-------------------|---|
| 29                                      | Number of adults referred to a source of substance abuse services   |                   | Report the unduplicated number of adults referred to services for substance abuse. It may include referrals to services provided by the home visiting program. Substance abuse services may include, for example, a substance abuse clinic, primary care physician, social worker, psychologist, psychiatrist, or mental health clinic. |
| 30                                      | Percent of adults referred to a source of behavioral health care  |                   | Calculate the percent as: $(100 \times \#27) / \#3$ .   |
| 31                                      | Percent of adults referred to services to treat depression  |                   | Calculate the percent as: $(100 \times \#28) / \#3$ .   |
| 32                                      | Percent of adults referred to a source of substance abuse services  |                   | Calculate the percent as: $(100 \times \#29) / \#3$ .   |
| 33                                      | Number of adults who were screened for any behavioral health care need, identified as needing behavioral health care, but are already receiving needed service, so did not receive a referral     |                   | Consider only the adults reported in #21. Report the unduplicated number of adults screened for mental or behavioral health care needs but who were already receiving services for that behavioral health need.   |
| 34                                      | Number of adults who were screened for depression, were identified as needing services to treat depression, but are already receiving services to treat depression, so did not receive a referral |                   | Consider only the adults reported in #22. Report the unduplicated number of adults screened for depression but who were already receiving services for depression.  |

## **Section 2. Adult and Pediatric Health Care and Access (cont.)**

| <b>C. Adult Behavioral Health Care (cont.)</b> |  | <b>Number or Percent</b> | <b>Definition</b>   |
|--|--|--------------------------|---|
| 35   | Number of adults who were screened for substance abuse services, were identified as needing substance abuse services, but are already receiving substance abuse service, so did not receive a referral |                          | Consider only the adults reported in #23. Report the unduplicated number of adults screened for substance abuse but who were already receiving services for substance abuse.  |
| 36   | Number of adults who were referred and received any behavioral health care services  |                          | Consider only the adults reported in #27. Report the number of these adults for whom the program verified (verification can be obtained by asking the adult) that the adult had a regular source of behavioral or mental health care. |
| 37   | Number of adults who were referred and received services to treat depression   |                          | Consider only the adults reported in #28. Report the number of these adults for whom the program verified (verification can be obtained by asking the adult) that the adult had a regular source of care for depression               |
| 38   | Number of adults who were referred and received substance abuse services   |                          | Consider only the adults reported in #29. Report the number of these adults for whom the program verified (verification can be obtained by asking the adult) that the adult had a regular source of substance abuse services.         |
| 39   | Percent of referred adults who received services for mental or behavioral health care services   |                          | Calculate the percent as: $(100 \times \#36) / \#27$ .  |
| 40   | Percent of referred adults who received services to treat depression   |                          | Calculate the percent as: $(100 \times \#37) / \#28$ .  |
| 41   | Percent of referred adults who received substance abuse services   |                          | Calculate the percent as: $(100 \times \#38) / \#29$ .  |

## **Section 2. Adult and Pediatric Health Care and Access (cont.)**

| <b>D. Adult Tobacco Cessation</b> |  | <b>Number or Percent</b> | <b>Definition</b>  |
|-----------------------------------|--|--------------------------|--|
| 42                                | Number of adults who were screened for tobacco use or tobacco cessation needs                                  |                          | Report the unduplicated number of adults screened for tobacco cessation service needs.   |
| 43                                | Percent of adults screened for tobacco use or tobacco cessation needs  |                          | Calculate the percent as: $(100 \times \#42) / \#3$ .  |
| 44                                | Number of adults who were referred to a source of tobacco cessation information or services.                   |                          | Report the number of adults referred to tobacco cessation services. A referral is defined, at a minimum, as providing the adult information on how to access further tobacco cessation services. This may include referrals to services provided by the home visiting program. |
| 45                                | Percent of adults who were referred to a source of tobacco cessation information or services.                  |                          | Calculate the percent as: $(100 \times \#44) / \#3$ .  |
| 46                                | Number of adults who were identified as needing services, but are already receiving them, so were not referred |                          | Consider only those adults in #42. Report the unduplicated number of adults screened for tobacco cessation needs but who were already receiving services.  |
| 47                                | Number of adults who were referred and received services   |                          | Consider only the adults reported in #44. Report the number of these adults for whom the program verified (verification can be obtained by asking the adult) that the adult had accessed tobacco cessation services.   |
| 48                                | Percent of referred adults who received services for tobacco cessation   |                          | Calculate the percent as: $(100 \times \#47) / \#44$ .   |

## **Section 2. Adult and Pediatric Health Care and Access (cont.)**

| <b>E. Adult Medical Insurance</b> |  | <b>Number or Percent</b> | <b>Definition</b>   |
|-----------------------------------|--|--------------------------|---|
| 49                                | Number of enrolled adults who already had health insurance   |                          | Report the unduplicated number of adults identified as already having a source of health insurance. Health insurance may include private health insurance, Medicare, Medicaid, State Children's Health Insurance Program (SCHIP), a State-sponsored health plan, other government-sponsored health plan, a military health plan, or the Indian Health Service.                          |
| 50                                | Number of enrolled adults who did not already have health insurance                                  |                          | Report the unduplicated number of adults without confirmed health insurance as defined in #49. This number should equal the count in #3 minus the count in #49.   |
| 51                                | Number of adults who were assisted in trying to obtain health insurance                              |                          | Consider only the adults reported in #50. Report the number of these adults for whom the program made a referral to health insurance or provided assistance with insurance application. This may be defined as providing the family information on how to obtain health insurance from various agencies, and/or help in locating, filling out, and/or submitting application materials. |
| 52                                | Percent of adults who needed health insurance and were assisted in trying to obtain health insurance |                          | Calculate the percent as: $(100 \times \#51) / \#50$  |
| 53                                | Number of adults who were assisted in obtaining health insurance who received health insurance       |                          | Consider only the adults reported in #51. Report the number of these adults for whom the program verified (verification can be obtained by asking the adult) that the adult had obtained health insurance.  |
| 54                                | Percent of adults in need of health insurance who received health insurance                          |                          | Calculate the percent as: $(100 \times \#53) / \#50$  |

## Section 2. Adult and Pediatric Health Care and Access (cont.)

| F. Pediatric Primary Care |   | Number or Percent | Definition   |
|---------------------------|---|-------------------|--|
| 55                        | Number of children who already had a regular source of pediatric care   |                   | Report the unduplicated number of children identified as already having a regular source of primary care and, therefore, not in need of referral. Primary pediatric care services may include the place the family usually takes the child for most care, including well child care, advice about the child's health, and when the child is sick. It can include a doctor's office, clinic, and community health center. Do not include children whose regular source of care was an urgent care clinic or emergency department. |
| 56                        | Number of children who did not have a regular source of pediatric care  |                   | Report the unduplicated number of children without a confirmed regular source of care as defined in #55. This number should equal the count in #2 minus the count in #55.  |
| 57                        | Number of children referred to a regular source of pediatric care   |                   | Consider only the children reported in #56. Report the number of these children the program referred for pediatric care. A referral is defined, at a minimum, as providing the family information on how to schedule visits at available pediatric care sites.   |
| 58                        | Percent of children who needed and were referred to a regular source of pediatric care                        |                   | Calculate the percent as: $(100 \times \#57) / \#56$   |
| 59                        | Number of referred children with at least one visit to a regular source of pediatric care                     |                   | Consider only the children reported in #57. Report the number of these children for whom the program verified (verification can be obtained by asking the adult) receipt of at least one visit to the referral site for regular pediatric care.  |
| 60                        | Percent of program children who needed a source of pediatric primary care who now have had at least one visit |                   | Calculate the percent as: $(100 \times \#59) / \#56$   |
| 61                        | Number of children for whom the adequacy of pediatric primary care was determined                             |                   | Consider only the children reported in #55 and #60. Report the number of these children for whom the program verified (verification can be obtained by asking the adult) when well child visits were made and compared the number of well child visits with the number recommended by the American Academy of Pediatrics (AAP; <a href="http://practice.aap.org/content.aspx?aid=1599">http://practice.aap.org/content.aspx?aid=1599</a> ).  |
| 62                        | Percent of program children receiving adequate pediatric primary care   |                   | Calculate the percent as: $(100 \times \#61) / \#2$ .  |

### Section 3. Domestic Violence Services

| A. Domestic Violence (DV) |   | Number or Percent | Definition  |
|---------------------------|---|-------------------|---|
| 63                        | Number of adults screened for DV  |                   | Report the number of enrolled adults who were screened for domestic violence, including intimate partner violence and parent, sibling, or other householder violence.   |
| 64                        | Percent of adults screened for DV   |                   | Calculate the percent as: $(100 \times \#63) / \#3$ .   |
| 65                        | Number of adults referred to a source of DV services  |                   | Report the unduplicated number of adults who were referred to a source of services. Domestic violence services may include services such as domestic violence prevention and treatment services, referrals to or provision of safe housing/shelter, trauma-informed and trauma-specific services, legal advocacy and assistance. It may include referrals to services provided by the home visiting program. A referral is defined, at a minimum, as providing the parent information on how to obtain DV services. |
| 66                        | Percent of adults referred to a source of DV services   |                   | Calculate the percent as: $(100 \times \#65) / \#3$ .   |
| 67                        | Number of enrolled who were identified as needing services, but who were already receiving services |                   | Consider only the adults reported in #63. Report the unduplicated number of adults identified as already receiving domestic violence services as described in #65.  |
| 68                        | Number of adults referred to DV services who now have a safety plan                                 |                   | Consider only those adults referred to DV services as reported in #65. Report the number of adults who have a safety plan.  |
| 69                        | Percent of adults identified as being at risk for DV who now have a safety plan                     |                   | Calculate the percent as: $(100 \times \#68) / (\#66 + \#67)$ .   |
| 70                        | Number of adults who accessed DV services as a result of the referral                               |                   | Consider only the adults reported in #65. Report the number of these adults for whom the program verified (verification can be obtained by asking the adult) that the adult had received DV services.   |
| 71                        | Percent of adults in need of DV services who received services                                      |                   | Calculate the percent as: $(100 \times \#70) / \#65$ .  |

## Section 4. Other Services for Children

| A. Developmental Screenings and Early Intervention |   | Number or Percent | Definition   |
|--|---|-------------------|--|
| 72   | Number of children screened for developmental delay, risks, or disorder   |                   | Report the unduplicated number of children who were screened for developmental delay, risks, or disorder by the home visiting program. Developmental screenings can include the administration of a brief standardized tool or tools aiding in the identification of children at risk of a developmental disorder (American Academy of Pediatrics, 2006).  |
| 73   | Percent of children screened for developmental delay, risks, or disorder  |                   | Calculate the percent as: $(100 \times \#72) / \#2$  |
| 74   | Number of children referred for developmental or early intervention services  |                   | Report the unduplicated number of children who are referred for developmental or early intervention assessments or services. Developmental/Early intervention services may include services such as Part C Early Intervention services, additional screenings and/or assessments for any physical, social/emotional, cognitive and/or behavioral delays and/or concerns, early intervention and/or therapy services (speech, physical, occupational, play and/or individual, family and/or parent/child mental health therapy) vision and hearing services, infant development programs, nutrition/feeding services, or community-based rehabilitative services. It may include referrals to services provided by the home visiting program. |
| 75   | Percent of children referred for developmental or early intervention services   |                   | Calculate the percent as: $(100 \times \#74) / \#2$ .  |
| 76   | Number of children screened for developmental delay, identified as needing a particular service, but are already receiving that service |                   | Consider only those children screened in #72. Report the unduplicated number of children who would need to be referred for additional developmental or early intervention assessments or services, except that they are already receiving these services (e.g. Early Intervention Part C).   |
| 77   | Number of children referred who began services  |                   | Consider only those children reported in #74. Report the unduplicated number of children who began using services as defined in #74.   |
| 78   | Percent of children referred who began developmental services   |                   | Calculate the percent as: $(100 \times \#77) / \#74$ .   |

## Section 4. Other Services for Children (cont.)

| A. Developmental Screenings and Early Intervention (cont.) |   | Number or Percent | Definition   |
|--|---|-------------------|--|
| 79   | Number of children for whom the program assessed the family's early care and education needs or parents requested assistance obtaining early care and education |                   | Report the number of children for whom the program assessed the family's early care, child care, and education needs. These needs may include things such as preschool, child care, after-school care programs, and respite care and may be family-based, home-based, or center-based.   |
| 80   | Number of enrolled children whose families needed or requested any or additional early care and education services  |                   | Consider only those children reported in #79. Report the unduplicated number of children whose families needed or requested any new or additional early care and education services. These services may include things such as preschool, child care, after-school care programs, and respite care and may be family-based, home-based, or center-based. |
| 81   | Number of enrolled children whose families were referred to additional early care and education services  |                   | Consider only those children reported in #80. Report the unduplicated number of children whose families were referred to new or additional early care and education services. This may include referrals to services provided by the home visiting program.  |
| 82   | Percent of enrolled children whose families needed and were referred to additional early care and education services  |                   | Calculate the percent as: $(100 \times \#81) / \#80$ .   |
| 83   | Number of referred children who were then enrolled in early care and education services   |                   | Consider only those children reported in #81. Report the unduplicated number of children for whom it was verified (verification from adult) that early care and education services (as described in #80) were initiated as a result of the referral.   |
| 84   | Percent of referred children who enrolled in early care and education services  |                   | Calculate the percent as: $(100 \times \#83) / \#81$ .   |



## **Section 5. Other Services for Adults**

| <b>A. Employment</b> |  | <b>Number or Percent</b> | <b>Definition</b>   |
|----------------------|--|--------------------------|---|
| 85                   | Number of enrolled adults who were employed or studying  |                          | Report the number of enrolled adults who were employed or studying part-time or full-time. Employment may include having a job and working within the past 30 days or being a member of the uniformed services.               |
| 86                   | Number of enrolled adults who were not employed  |                          | Report the number of enrolled adults who were unemployed or not studying or not in the work force. (This count will equal #3 minus #85.)  |
| 87                   | Number of adults referred to employment, job-training, or educational services                     |                          | Report the number of enrolled adults who were referred to employment, job-training, or educational services.  |
| 88                   | Percent of adults referred to employment, job-training, or educational services                    |                          | Calculate the percent as: $(100 \times \#87) / \#3$ .   |
| 89                   | Number of adults referred to employment, job-training, or educational services who obtain services |                          | Consider only those adults in #87. Report the number of enrolled adults for whom it was verified (verification from adult) that employment, job-training, or educational services were initiated as a result of the referral. |
| 90                   | Percent of referred adults who obtained employment, job-training, or educational services          |                          | Calculate the percent as: $(100 \times \#89) / \#87$ .  |

**Section 5. Other Services for Adults (cont.)**

| <b>B. Public Benefits</b> |   | <b>Number or Percent</b> | <b>Definition</b>  |
|---------------------------|---|--------------------------|--|
| 91                        | Number of enrolled adults who were already receiving some public benefits |                          | Report the unduplicated number of adults who were already receiving some public benefits. Public benefits may include WIC, food stamps or supplemental nutrition assistance program, Social Security disability, housing, or other public programs.                            |
| 92                        | Number of enrolled adults who were not receiving any public benefits      |                          | Report the unduplicated number of adults not receiving any public benefits as defined in #91. This number should equal the count in #3 minus the count in 91.  |
| 93                        | Number of adults screened for need for public benefits                    |                          | Consider all adults. Report the number of adults screened for needing or qualifying for one or more public benefits. Public benefits may include WIC, food stamps or supplemental nutrition assistance program, Social Security disability, housing, or other public programs. |
| 94                        | Number of adults referred to public benefits                              |                          | Consider adults reported in #93. Report the number of adults who were referred to at least one type of public benefit program. A referral is defined, at a minimum, as providing the adult information on how to register or obtain a public benefit.                          |
| 95                        | Percent of adults referred to public benefits                             |                          | Calculate the percent as: $(100 \times \#94) / \#3$ .  |
| 96                        | Number of adults who were referred and received needed services           |                          | Consider adults reported in #94. Report the number of adults for whom it was verified (verification from adult) that they signed up for and/or received at least one type of public benefit.   |
| 97                        | Percent of referred adults who received needed benefit services           |                          | Calculate the percent as: $(100 \times \#96) / \#94$   |

## Appendix A

### Summary of Constructs and Items Related to Reporting for the Coordination and Referral Benchmark Area (see page 45 of SIR guidance – OMB Control No. 0915-0336)

The **bolded** constructs below must be reported for this benchmark area. The numbered items following each construct are not required elements, but may be used by states as a way to fulfill the reporting requirements.

#### **Number of families identified for necessary services.**

- #24 - Percent of adults screened for behavioral health needs
- #26 - Percent of adults screened for substance abuse
- #43 - Percent of adults screened for tobacco use or tobacco cessation needs
- #73 - Percent of children screened for developmental delay, risks, or disorder

#### **Number of families that required services and received a referral to available community resources.**

- #10 - Percent of pregnant women in need of care who were referred to prenatal care
- #18 - Percent of adults in need of care who were referred to a regular source of care
- #30 - Percent of adults referred to a source of mental or behavioral health care
- #31 - Percent of adults referred to a source of services to treat depression
- #32 - Percent of adults referred to a source of substance abuse services
- #45 - Percent of adults who were referred to a source of tobacco cessation information or services
- #52 - Percent of adults who needed health insurance and were assisted in trying to obtain health insurance
- #58 - Percent of children who needed and were referred to a regular source of pediatric care
- #66 - Percent of adults referred to a source of DV services
- #75 - Percent of children referred for developmental or early intervention services
- #82 - Percent of enrolled children whose families needed and were referred to additional early care and education services
- #88 - Percent of adults referred to employment, job-training, or educational services
- #95 - Percent of adults referred to public benefits

#### **MOUs: Number of Memoranda of Understanding or other formal agreements with other social service agencies in the community.**

- #5a

**Information sharing: 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.**

#5b

**Number of completed referrals (i.e., the home visiting provider is able to track individual family referrals and assess their completion, e.g., by obtaining a report of the service provided).**

#12 - Percent of referred pregnant women receiving prenatal care

#20 - Percent of referred adults who now have a regular source of care

#39 - Percent of referred adults who received services for mental or behavioral health care services

#40 - Percent of referred adults who received services to treat depression

#41 - Percent of referred adults who received substance abuse services

#48 - Percent of adults referred who received services for tobacco cessation

#54 - Percent of adults in need of health insurance who received health insurance

#60 - Percent of program children who needed a source of pediatric primary care who now have had at least one visit

#71 - Percent of adults in need of DV services who received services

#78 - Percent of children referred who began developmental services

#84 - Percent of referred children who enroll in early care and education services

#90 - Percent of referred adults who obtain employment, job-training, or educational services

#97 - Percent of referred adults who received needed benefit services

## Appendix B

### Summary of Constructs and Items Required for Reporting for Other Benchmark Areas (see Home Visiting Updated State Plan – OMB Control No. 0915-0336)

#### SIR 3 Required Constructs

#### Items from Coordination and Referral Tool

##### I. Improved Maternal and Newborn Health

(i) Prenatal care

Item #14, “Percent of pregnant women who have received all recommended prenatal visits since enrollment in program”

(v) Screening for maternal depressive symptoms

Item #25, “Percent of adults screened for depression”

(vii) Well-child visits

Item #62, “Percent of program children receiving adequate pediatric primary care”

##### IV. Crime or Domestic Violence

Screening for domestic violence

Item #64, “Percent of adults screened for DV.”

Of families identified for the presence of DV, rate of families for which a safety plan was completed

Item #69, “Percent of adults identified as being at risk for DV who now have a safety plan”

