FY16 MIECHV Grant Final Reports for X10 Awards: Guidance and Tips from HRSA and DOHVE

Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program
November 7, 2018

Webinar Objectives

- **Describe purpose of Final Reports**
- **Describe HRSA expectations for Final Reports**
- **Outline Report submission and review timeline and process**
- **Provide tips for completing Final Reports**
- **Describe expectations for evaluation component of Final Reports**
- **Describe common evaluation summary mistakes and how to avoid them**

Purpose of Final Reports

- **Summarize programmatic goals and accomplishments for the grant period**
- **Discuss challenges and lessons learned**
- **Provide evaluation results**
  - Applicable to awardees who conducted a state-led evaluation and/or evaluated a promising approach with FY16 funds

HRSA Expectations for Final Reports

- **Use provided resources**
  - HRSA Guidance for writing the Formula (X10) Grant Final Report Narrative
  - Evaluation Checklist from DOHVE
    - Optional resource
    - Applicable only to X10 Reports with a state-led evaluation and/or promising approach
- **Include activities funded with FY16 funds from April 1, 2016 through September 30, 2018**
- **Keep to 50 page limit**

FY16 FINAL REPORT SUBMISSION and REVIEW TIMELINE AND PROCESS

STEP 1
10/2/18-12/28/18

STEP 2
12/28/18

STEP 3
12/28/18-2/22/19

STEP 4
2/22/19

STEP 5
2/22/19-4/30/19

STEP 6
5/15/19

STEP 1

10/2/18: Final Report guidance materials released in EHB: 1.) Guidance for writing the Formula (X10) Grant Final Report Narrative; and 2) DOHVE Evaluation Checklist

10/2/18-12/28/18: Awardees complete final reports

STEP 2

12/28/18: Awardees submit final reports via EHB to Project Officer (PO)

PO sends final reports with evaluation component to DOHVE Liaison

STEP 3

12/28/18-2/22/19: POs and DOHVE Liaisons (if applicable) Review Final Reports

For Final Reports with an evaluation component-Concurrent DOHVE and PO review: POs and DOHVE Liaisons will develop a review schedule so that they are prioritizing and reviewing the same awardee reports at the same time and completing initial reviews on a rolling schedule.

STEP 4

2/22/19: Final date for combined comments to be sent to all awardees from the PO

STEP 5

2/22/19-4/30/19: Awardee revisions and PO/DOHVE re-reviews: For minor revisions, awardees will have up to 5 calendar days to make revisions and for major revisions, awardees will have up to 10 calendar days to make revisions

STEP 6

5/15/19: Final date for revised final reports along with PO review documents to be uploaded into EHB

FY16 HRSA/DOHVE Joint Process

- *IMPORTANT DATES:

- 10/2/18- Release in EHB of Final Report Guidance Materials
- 12/28/18- Awardees submit Final Reports via EHB
- 2/22/19 – Due date for combined HRSA/DOHVE comments with required revisions to be sent to awardees
- 2/22/19-4/30/19 – Awardee revisions and PO/DOHVE re-reviews
- 5/15/19 – Final due date for revised Final Reports to be submitted in EHB

Tips for Completing Final Reports

- **Follow the HRSA guidance!**
- **Organize your narrative under the headings provided in the guidance and be sure to address each item**
- **For reports with an evaluation component:**
  - Work with your evaluator to complete the evaluation components
  - Use the DOHVE Evaluation checklist as a resource
  - May upload full evaluation report to EHB, but must cover all HRSA requirements in the Grant Final Report Narrative

Tips for Developing Evaluation Component of Final Reports

DOHVE

Key components to include in evaluation report sections

I. Evaluation Summary
Since this sub-section is an abbreviated, high-level summary of details discussed in subsequent sections, it would be most beneficial to write this section after writing the other sections. This section should include the following components:

a. Describe evaluation questions.
- What are the primary aims of the evaluation?
- What are the primary research questions the evaluation sought to address?
- Are the questions specific and measurable?

b. Describe study design.
- What study design was utilized to address these questions? For example, was an implementation or process evaluation used or was a matched comparison design used?

c. Describe the primary population(s) targeted in the evaluation.
- Provide any contextual background about the target population served.

d. Describe major findings.
- What did the evaluation show? For example, were there changes in participants' knowledge, attitudes, or behaviors? Were there changes in staff knowledge or behaviors? Were there improvements in program service delivery?

e. Identify and describe study limitations.
- Are there any important study limitations to note? For example, limitations due to sample size, reliability of data, language fluency, etc.?

f. Describe the implications of evaluation findings.
- Describe the implications of the evaluation findings and/or the process of carrying out evaluation activities. For example, how has this program and/or intervention impacted the community/families/individuals?

g. Lessons learned.
- What are lessons learned from the evaluation findings? What are the implications of lessons learned for future work and practice and how can they be used to enhance future program effectiveness?

II. Evaluation Design
This section should provide an overview of the evaluation, rationale, and considerations for the evaluation design, and the methods used to address evaluation questions. Please note that this section is much more detailed and should be more elaborate than the discussion of the evaluation design in section 1. *Note: If the evaluation consists of multiple study components, information below should be repeated for each study component as appropriate.

a. Specify the entities/organizations responsible for collection and reporting evaluation data.
- Describe who carried out all major evaluation components. For example, which entities/organizations designed data collection materials such as surveys or interview protocols. Which entities/organizations oversaw ongoing data collection? Which individuals actually carried out data collection activities? Which entities/organizations cleaned and analyzed data? Which entities/organizations reported evaluation data?

b. Provide a rationale for the evaluation.
- How and why were the evaluation topics, evaluation aims, and evaluation questions identified? How and why was the evaluation design selected? Include relevant literature if applicable.

c. Describe the intervention, adaptation, enhancement, or promising approach (if applicable).
- Provide sufficient description of the intervention, phenomenon, or concepts evaluated in the study. If applicable, ensure the intervention is clearly operationalized, including sufficient detail to replicate the study. Provide enough detail to determine whether the intervention was implemented consistently across study groups.
- If evaluating a program adaptation, enhancement, or promising approach, provide a brief description of the new or unique components.
- Include relevant background information (e.g., the physical, social, and/or cultural aspects of the setting/site where data were collected) to situate the study.

For continuing evaluations, summarize prior evaluation findings (if applicable).
- If the evaluation is a continuation of a prior evaluation, provide an update on use of prior evaluation findings. For example, how does the current evaluation build off findings established from a prior evaluation?

program theory of change.
...ribe the program's theory of change, including a visual or written description ...ing program outcomes to intervention activities. Explain how the evaluation aligns ... program theory of change.

... outcomes measured in the evaluation.
... immediate, intermediate, and long-term outcomes of the evaluation.

Follow Outline in HRSA Guidance

1. Evaluation Summary

2. Evaluation Design

3. Evaluation Results

4. Evaluation Successes and Challenges

5. Conclusions, Implications of Findings & Recommendations, and

6. Plan for Dissemination of Evaluation Findings

Formatting Tips

- **Include page numbers**
- **Include a table of contents**
- **Number the evaluation questions**
- **Spell out acronyms when used for the first time**
- **Provide summary tables aligning research questions with data collection methods, data collection tools, frequency of data collection, respondents, and proposed analyses**
- **Restate research questions before describing data collection methods and analyses to address research questions**

Evaluation Report Reminders: Commonly Missing Components

Address All Evaluation Questions

- **For each question, include the following:**
  - Describe assessment tools and instruments used
  - Specify sample and relevant characteristics
  - Clearly describe analytic methods and approaches
  - Describe outcomes
  - If an evaluation question could not be addressed, provide an explanation in the 'Deviations from Approved Evaluation Plan' portion of the Evaluation Successes and Challenges section

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Continuing Evaluations

- **Provide a crosswalk between previous and current evaluation questions**

| Research Question	Previous Evaluation	Continuing Evaluation

Sampling Plan, Size, and Characteristics

- **Include details about sampling plan, sample size, and sample characteristics**
  - Outline sampling and recruitment approach for each evaluation question. For example, were all MIECHV programs surveyed or a selection? How were programs and home visitors selected?
  - Indicate the final sample size for each evaluation question
  - Include a summary table of sample characteristics, including control group—if applicable

Power Analysis

- **If power analysis was completed, provide effect size and confidence intervals.**
  - Is the design balanced?
  - Minimum detectable effect
  - Under what conditions was the MDE calculated?
  - Does the power analysis include pre-test covariates?
  - Did the final analysis differ from the assumptions of the original power analysis?

Power Analysis
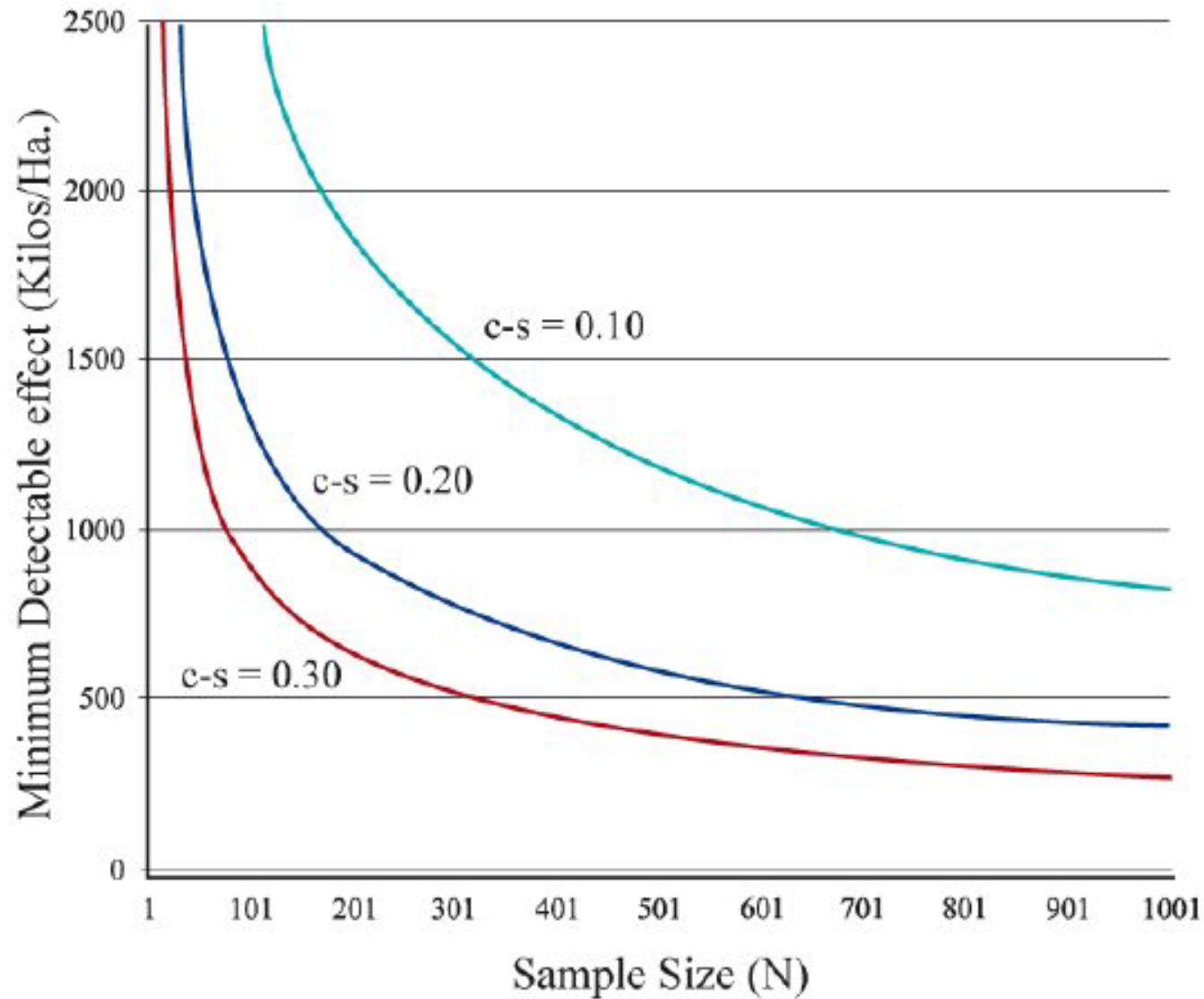
Psychometric Information on Instruments

- **Provide psychometric information on all data collection instruments**
  - Provide Cronbach Alpha or citations for authors who have ran reliability/validity estimates on the instrument/s
  - If you ran your own reliability/validity estimates, include summary statistics

Qualitative Data Analysis

- **Include details of qualitative data analysis**
  - At a minimum, include:
    - what theoretical approach was used (if any),
    - how was data collected (e.g. phone/in person interviews, focus groups) and transcribed,
    - what coding approach was used (e.g. thematic analysis),
    - what reliability checks were used

Other Common Missing Elements

- **Discussion of *evaluation* successes and challenges**

- **Summary of any deviations from approved evaluation plan**
  - Changes in research questions
  - Changes in data collection or data sources
  - Changes in analysis plan

Tips for Condensing Larger Evaluation Reports

Provide Supporting Evidence

- **Each section of the report should support and align with other sections. For example:**

Evaluation recommendation: Home visitors should receive additional support and guidance from supervisors to increase their comfort and confidence addressing the presence of domestic violence.

Supporting finding: 90% (n=27) of home visitors reported a lack of comfort and guidance on how to address the presence of domestic violence. 70% (n=21) home visitors felt their supervisors could provide more direct guidance and support on addressing domestic violence*.

Supporting methods and sample: 30 home visitors participated in semi-structured interviews at two time points to discuss how they handle sensitive topics with families and available program support*.

* fictional data

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Tips for Condensing Larger Evaluation Reports

- **Include key findings, methods, and analysis for all evaluation questions in approved evaluation plan**

- **Include only relevant findings and details**

Organize Narrative Summaries in Tables

Evaluation Question	Data Collection Methods	Frequency of Data Collection	Sample	Analysis Methods
What client characteristics are associated with family engagement as measured through number of completed home visits?	Family intake demographic form; ETO tracker of receipt of home visits	Ongoing throughout 7 months. Total number of completed visits calculated from time of enrollment to September 1, 2017.	112 clients	Bivariate correlations

Organize Narrative Summaries in Tables

Data Collection Tool	Description	Items or Scales Used	Available Information on Reliability and Validity
Home Visit Observation Form (HVOF)	Measures process and content of home visits	Used full form	Inter-observer agreement rates – 85% across all categories and 70% for each specific category on four successive observations

Organize Narrative Summaries in Tables

Table 21. Coordination Domains and Themes from Provider and Home Visiting Perspectives

Coordination Domain	Medical Providers	Home Visiting Staff
	Themes	
Mutual Awareness	*Medical providers are generally unaware of home visiting though other practice staff may have knowledge; home visiting staff perceive they know medical providers' roles*	
	Ill-informed of home visiting programs – muddled with insurer-based case managers, home care nurses	Home visiting programs track when/where the client receives health care. Doctors *should* know about home visiting programs
Perceived Value	*Consensus that coordination and synergistic teamwork improves patient outcomes*	
	Near unanimity that better coordination could improve quality, efficiency, safety, and access	Agreement that providers and home visitors have similar goals for families; home visitors understand community
Resources and Capacity	*Existing coordination mechanisms are flawed/non-existent; practices and home visiting programs' baseline capabilities and priorities for change vary*	
	Coordination *within* the health care sector using health information technology (IT) is the priority	Some home visiting programs lack coordination infrastructure such as computers and WiFi.

Organize Narrative Summaries in Tables

C.   Target Population

Our target sample was 150 Hispanic women and their children (i.e., 75 in each group) in the middle of the state.

Inclusion Criteria	Exclusion Criteria
Be eligible to receive MIHOW services ("at-risk" for poor birth outcomes due to any economic or social factor such as receiving government assistance, reporting low income, having little/no support system, low education, isolation, etc.)	Previously received MIHOW services
Self-identify as Hispanic	Suffer from severe mental or physical disability
Provide written confirmation of pregnancy ≤ 26 weeks gestation	Are under 18 years of age and do not have parental consent
Resides within 30 miles of Catholic Charities' Hispanic Family Services offices	
Willing to be randomized into one of two groups : • Minimal intervention (will receive printed educational materials only) • Full intervention (will receive minimal intervention plus MIHOW program—home visits and opportunities for group participation)	

Table 4: Characteristics of Families in the Analytic Sample (Administrative data, N=1209)

	EHS-HB n=15	HIPPY n=329	NFP n=358	PAT n=507	Total %	Total # N=1209
Age of Youngest Child						
Unborn	0	0	68.7	0.6	14.3	173
0 Years Old	33.3	0.3	30.7	15.8	17.6	213
1 Year Old	20	0.3	0	14.6	6.5	78
2 Years Old	40	0.3	0	21.9	9.8	118
3 Years Old	6.7	32.8	0	29	21.2	256
4 Years Old	0	45.6	0	14.2	18.4	222
5 Years Old	0	10.9	0	2	3.8	46
6 Years Old and Older	0	1.5	0	0.4	1.6	7
Unknown	0	8.2	0.6	1.6	7.9	96
Language						
English	100	38.6	82.7	53.3	58.6	708
Spanish	0	57.8	15.9	45.8	39.6	479
Both English and Spanish	0	3.3	1.4	1.0	1.7	21
Other	0	0.3	0	0	0.1	1
Unknown	0	0	0	0	0	0
Marital Status[1]						
Cohabiting	13.3	9.1	31.3	19.3	20	242
Married	13.3	73.6	22.9	53.5	49.4	597
No Relationship	73.3	12.8	45.5	25.4	28.5	345
Unknown	0	4.6	0.3	1.8	2.1	2.1
Mothers' Education Level						
Less Than High School	33.3	36.8	37.4	48.3	41.8	505
High School Diploma or GED	26.7	34.6	13.1	24.5	24.0	289
Some College	20	16.1	9.8	18.7	15.4	186
Bachelor's Degree or Higher	0	7.6	0.3	7.5	5.3	64
Unknown	20	4.9	39.4	1	13.6	165
Poverty Status (FPL)						
50% and under	60	19.1	66.8	27.8	37.4	452
51-100%	13.3	30.7	11.7	32.5	25.6	310
101-133%	0	13.4	6.4	11.6	10.4	126
134-250%	0	6.7	6.1	9.7	7.7	93
251-300%	6.7	3.6	0	6.7	3.9	47
Unknown	20	26.4	8.9	11.6	15	181
Race/Ethnicity						
African-American	13.3	1.2	18.4	5.5	8.3	100
Hispanic	73.3	83	61.2	83.2	76.5	925
White	12.4	13.7	16.8	8.9	12.4	150
Other	2.8	2.1	3.6	2.4	2.8	34

Source: Administrative data.

Notes: [1]Marital status categories were developed using a combination of the marital status data collected by the program models, which only include categories for Married, Never Married, Widowed, Separated or Divorced, and data on fathers' residence which was collected for this evaluation. Parents who were Never Married with a resident father were labeled Cohabiting, and parents who were Never Married with a non-resident father were labeled No Relationship. As a result, we may over-estimate the number of parents who are not in a relationship.

Q&A