DEPARTMENT OF HEALTH

Promising Practices Quarterly Data Collection Submission Guide

Strong Foundations Evidence-Based Family Home Visiting grantees are required to submit the Strong Foundations Quarterly Report each calendar quarter. This guide provides instructions for completing and submitting the report.

How to access the report

The Promising Practices Quarterly Report is a REDCap survey. Open a new report by clicking on this link Promising Practices Quarterly Report (https://redcap.health.state.mn.us/redcap/surveys/?s=LMTFDPFMWTT8PXTC). You do not need an MDH REDCap account to access this form.
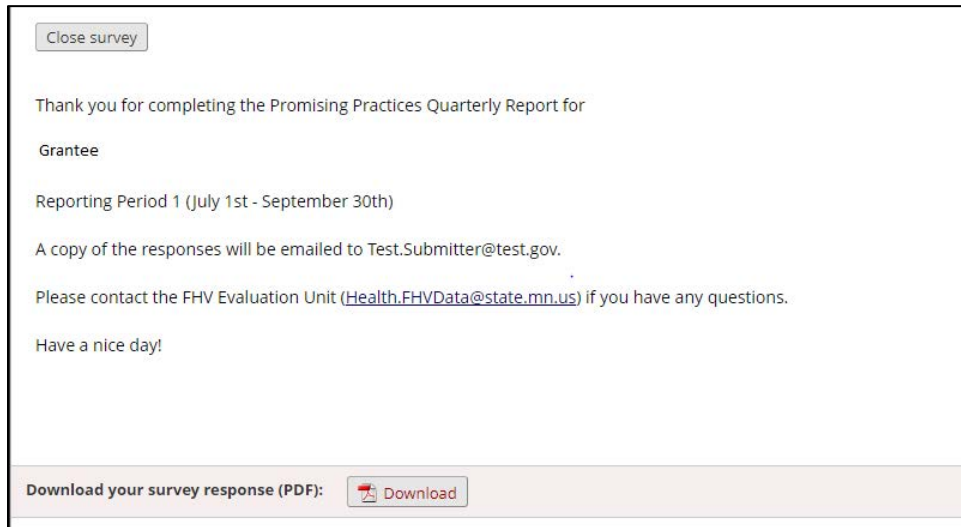
Completing the report

Review the questions beginning on page 6 of this document to gather the necessary information before completing the form for the type of FHV grant that you are reporting on.

- To complete the form, answer all required questions, plus any optional questions as appropriate, and click "Submit" at the end of the survey. You will see a completion screen including the grantee name, grant type, and quarter on the form (Figure 1). You will also see a button that allows you to download a PDF copy of the completed form for your records.

A confirmation email will be sent to the email address of the person completing the form. This email will include the responses given to questions on the report for your records.

Figure 1. Screen displayed when the Promising Practices Quarterly Report is completed.
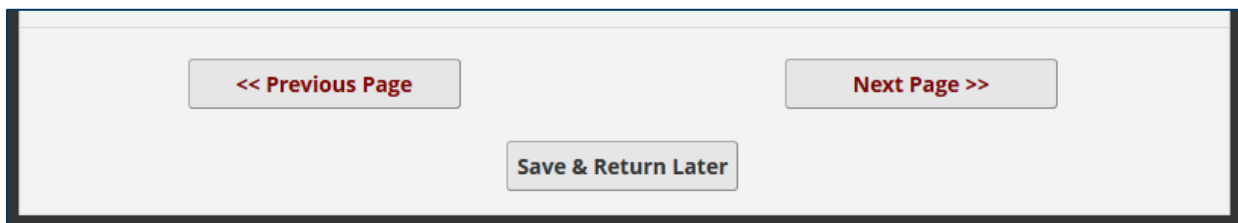
Saving and returning to finish an incomplete report

Avoid creating a new form for your grant after you have already started one for the quarter. REDCap will not prevent you from creating a new form when one already exists for your grant, however creating multiple forms for your grant will make it more difficult for MDH-FHV staff to track submissions.

If you need to save a partially completed form, exit the survey, and return to complete it later, click the "Save & Return Later" button at the bottom of any page of the form (Figure 2).

Figure 2. Save & Return Later button.

You will see a pop-up window with a Return Code (Figure 3). Copy or write down the Return Code, then click the "Close" button in the pop-up window. Please note that the Return Code is case-sensitive. You will need this Return Code to access your partially completed form.

Figure 3. Pop-up window with Return Code.
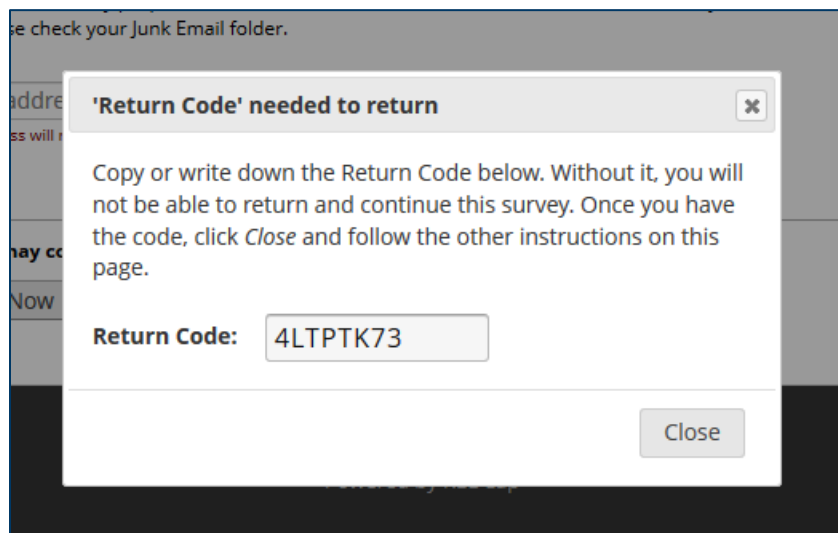
On the screen after you close the pop-up window, follow the instructions to bookmark the webpage, or email yourself the link to the webpage where (Figure 4).

Figure 4. Instructions for returning to finish the form.

If you have the Return Code, but do not have the link for returning to the survey, you can access it in these two ways:

1. Click on this link: Promising Practice Quarterly Data Collection Return Link (https://redcap.health.state.mn.us/redcap/surveys/?s=LMTFDPFMWTT8PXTC&__return=1)

2. Open the link for a new form and click on the "Returning?" link in the upper right (Figure 5).

Figure 5. Returning link in upper right of new form.

When you are ready to continue the form, open the link for returning to the survey, and enter the Return Code (Figure 6). This should open the form with your saved data.

Figure 6. Screen where the Return Code is entered.

Submitting a replacement form

Once you have submitted a completed form, you will **not** be able to access the form and modify your answers. If it is necessary to submit a replacement form, open a new form by clicking on the survey link. Complete the form with the updated information, indicating on the bottom of the first screen that the form is a re-submission (Figure 7).

Figure 7. Question asking whether for is a first submission or re-submission.

Is this the first Promising Practices Quarterly Report submission for _____, _____ or is this a re-submission?
* must provide value

○ First Submission
○ Re-Submission

Due dates for 2023 & 2024

The Promising Practices Quarterly Report is due on the 30th day following the end of each calendar quarter, or the next business day if the 30th falls on a weekend or holiday. Due dates for 2023 and 2024 are provided in the table below.

FHV grantees that cannot submit the form by the due date should contact the FHV Evaluation Unit (Health.FHVData@state.mn.us) **on or before the due date** to request an extension. Grantees will be notified if the **due date** differs from what is listed below:

Calendar Quarter	Due Date
Quarter 1 (July 1st – September 30th)	October 30, 2023
Quarter 2 (October 1st – December 31st)	January 30, 2023
Quarter 3 (January 1st – March 31st)	April 30, 2023
Quarter 4 (April 1st – June 30th)	July 30, 2024

Form questions

First Page

Question Language	How to Respond
Form Submission Date	Auto populated
What calendar year are you completing this form for?	▪ 2023 ▪ 2024 ▪ 2025

Question Language	How to Respond
What quarter are you completing this form for?	Answer options: ▪ Quarter 1 (July 1st – September 30th) ▪ Quarter 2 (October 1st – December 31st) ▪ Quarter 3 (January 1st – March 31st) ▪ Quarter 4 (April 1st – June 30th)
FHV Grantee Name	Select the name of the FHV Grantee (grant fiscal host) from this drop-down list
Name of person completing this form	Enter respondent's name
Email Address of person completing this form	Enter respondent's email address – a copy of the completed form will be sent to this address
Is this the first Strong Foundations Quarterly Report submission for [FHV Grantee Name], [Quarter] or is this a re-submission?	Answer options: ▪ First Submission ▪ Re-Submission

Section A: Households Currently Receiving Services as of the End of the Quarter

▪ In this section, report households served by the Promising Practices grant awarded to [Grantee Name] that were Currently Receiving Services as of the last day of [Quarter].

▪ "Currently Receiving Services" means that the household was enrolled and actively participating in the home visiting program, according to the definition used by the home visiting model.

▪ The Total Number of Households Currently Receiving Services will be used by MDH to track the grantee's maintenance of target caseload for this grant.

Figure 8. Table in Section A for reporting Households Currently Receiving Services as of the last day of the quarter.

	Households Served by the Promising Practices Grant
Number of Households *newly-enrolled this quarter*, that were Currently Receiving Services as of the last day of Reporting Period 1 (July 1st - September 30th)	
Number of Households *continuing from last quarter*, that were Currently Receiving Services as of the last day of Reporting Period 1 (July 1st - September 30th)	
Total Number of Households Currently Receiving Services as of the last day of Reporting Period 1 (July 1st - September 30th) Please review these numbers for accuracy. If they do not appear correct, check your answers to the previous questions.	

Question Language	How to Respond
Number of Households *newly-enrolled* this quarter, that were Currently Receiving Services as of the last day of [Quarter]	Enter whole numbers only.
Number of *continuing from last quarter*, that were Currently Receiving Services as of the last day of [Quarter]	Enter whole numbers only.
Total Number of Households Currently Receiving Services as of the last day of [Quarter] Please review for accuracy. If this number does not appear correct, please review your answers to the previous two questions.	Calculated field – this is the sum of households newly-enrolled this quarter, and households continuing from last quarter.

Section B: Family Engagement

In this section, report households that were served by the Promising Practices grant that were closed out of the EB Family Home Visiting program during [Quarter], because they completed the program or were closed (stopped services) for other reasons.

Figure 9. Table in Section B for reporting Family Engagement during the quarter.

	Households served by the Promising Practices Grant
Number of Households that Completed the home visiting program during Reporting Period 1 (July 1st - September 30th) **Completed: household completed or graduated from the home visiting program, according to home visiting model-specific definitions or criteria**	
Number of Households that Stopped Services during Reporting Period 1 (July 1st - September 30th) **Stopped Services: household was closed before completing the home visiting program according to home visiting model-specific definitions or criteria**	
Total Number of Households that Closed during Reporting Period 1 (July 1st - September 30th) **Please review this number for accuracy. If this number does not appear correct, please review the answers for the previous questions.**	

Question Language	How to Respond
Number of Households that Completed the home visiting program during [Quarter] Completed: household completed or graduated from the home visiting program, according to home visiting model-specific definitions or criteria	Enter whole numbers only.

Question Language	How to Respond
Number of Households that Stopped Services during [Quarter] Stopped Services: household was closed before completing the home visiting program according to home visiting model-specific definitions or criteria	Enter whole numbers only.
Total Number of Households that Closed during [Quarter] Please review this number for accuracy. If this number does not appear correct, please review the answers for the previous questions.	Calculated field – this is the sum of households that completed and stopped services during the quarter (closed during this quarter).

Section C: Staff Recruitment and Retention

- Report the number Full-Time Equivalents (FTEs) paid for using Promising Practices grant funding awarded to [grantee], according to their status as of the last day of [Quarter].

- Only count the proportion of FTE for each staff member that is supported by this grant's funds. For example, a 1.0 FTE staff member who is supported 30% through this grant's funds and 70% through other funds would count for 0.3 FTE for the purposes of this section.

- Review the total FTE for each category for accuracy. Totals should reflect your approved grant budget.

Figure 10. Table in Section D for reporting Staff Recruitment and Retention during the quarter.

	FTE that was *filled* as of the last day of Reporting Period 1 (July 1st - September 30th)	FTE that was *vacant* as of the last day of Reporting Period 1 (July 1st - September 30th)	Total FTE (should match approved Strong Foundations budget)
Home Visitors If a Supervisor carries a caseload of families, include the Supervisor's FTE that is funded for providing home visiting services in this row.			
Supervisors Supervisor: a position that provides administrative supervision to one or more home visiting staff. Do not include FTE for staff that provide Reflective Supervision unless those positions also provide administrative supervision.			
Other Staff Include FTE for other staff positions not included in Home Visitors and Supervisors above, such as outreach staff, data support, accountatns, and other roles supporting the Promising Practices home visiting program.			

Question Language	How to Respond
FTE Home Visitors that were filled as of the last day of [Quarter] **Note**: If a Supervisor carries a caseload of families, include the Supervisor's FTE that is funded for providing home visiting services in this row.	Enter whole or fractional (decimal) numbers
FTE Home Visitors that were vacant as of the last day of [Quarter]	Enter whole or fractional (decimal) numbers
Total Home Visitor FTE (should match approved Strong Foundations budget)	Calculated field- sum of filled and vacant home visitor FTE
FTE Supervisors that were filled as of the last day of [Quarter]	Enter whole or fractional (decimal) numbers
FTE Supervisors funded by [FHV Grant Type] that were vacant as of the last day of [Quarter]	Enter whole or fractional (decimal) numbers
Total Supervisor FTE (should match approved Strong Foundations budget)	Calculated field- sum of filled and vacant supervisor FTE

Question Language	How to Respond
FTE Other Staff that were filled as of the last day of [Quarter]	Enter whole or fractional (decimal) numbers
FTE Other Staff] that were vacant as of the last day of [Quarter]	Enter whole or fractional (decimal) numbers
Total Other Staff FTE (should match approved Strong Foundations budget)	Calculated field- sum of filled and vacant Other Staff FTE
Describe any staffing changes for the Strong Foundations grant during the reporting quarter. Include whether new staff were hired, changes to staff responsibilities.	Provide a response in the text box, if applicable

Supervisor: a position that provides administrative supervision to one or more home visiting staff. Do not include FTE for staff that provide Reflective Supervision unless those positions also provide administrative supervision.

Other staff: Include FTE for other staff positions not included in Home Visitors and Supervisors above, such as outreach staff, data support, accountants, and other roles supporting the Strong Foundations home visiting program.

Section D: Additional Questions

- This section asks for the total number of home visits completed during the quarter. It also asks two open-ended qualitative questions.

Question Language	How to Respond
What are the total number of home visits that were completed during the quarter?	Enter whole numbers only.
Do you have any changes to your home visiting program that you feel is important to talk about?	Provide a response in the text box, if applicable
Please provide any additional comments that would help the Family Home Visiting Section understand the information in this report.	Provide a response in the text box, if applicable

Definitions

- **Household:** For the purpose of this form, "household" is synonymous with "family," and refers to the group of people who are being served together as one Family Home Visiting case or caseload slot. At a minimum, a household consists of a pregnant person, or of a primary caregiver plus a child; households may include additional caregivers and/or children. A primary caregiver may be the parent of the child or children, or may be a grandparent, other relative, or a foster parent. Home visiting models may have model-specific definitions for who can be served together in a household.

- **Households Currently Receiving Services:** A household served by the grant that is enrolled and active in home visiting services. Households should be classified as "active" according to the guidance or definitions provided by the evidence-based model. Do not include households or cases that are still open but are inactive at the time of reporting.