

MIECHV Demonstration of Improvement in Benchmark Areas:

As documented in the MIECHV Program Guidance on Meeting Requirements to Demonstrate Improvement in Benchmark Areasⁱ, improvement in a benchmark area is defined as meeting the identified measure-level improvement criteria in at least one-third (33.3%) of the measures under a specified benchmark area (rounded to the closest whole number), with a minimum of improvement in at least one measure for each benchmark area.

For each of the 19 measures, improvement will be measured by comparing the awardee's FY 2020 measure-level performance data to both baseline data for that measure as well as the national threshold. Improvement for a measure is defined as meeting one or both of the following criteria:

- 1) Any change in the intended direction for that measure, as compared to baseline.
- 2) Meeting or exceeding the established threshold for a measure, while simultaneously not decreasing performance from baseline by more than 10%.

This file contains 1) an overview of the baseline calculation and 2) the awardee's 2020 baseline values for each of the 19 performance measures. A separate document titled "MIECHV Demonstration of Improvement in Benchmark Areas: FY 2020 National Threshold Values" contains the national threshold values for each of the 19 performance measures.

i. MIECHV Program Guidance on Meeting Requirements to Demonstrate Improvement in Benchmark Areas:

<https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/MIECHV-Assessment-of-Improvement-Guidance-508.pdf>

Baseline Calculation Overview

The baseline for each measure was calculated by computing the mean value of the two preceding years (FY 2018 and FY 2019) for each measure, for each awardee. The mean value was computed by adding the two annual performance values for that measure together and dividing by two.

Baseline Value: Calculated for each measure

$$\text{Baseline Value}^i = \frac{\text{2018 performance value} + \text{2019 performance value}}{2}$$

The annual performance values for each measure were obtained from the awardee's 2018 and 2019 MIECHV Annual Performance Report submissions. The annual performance values cannot be altered.

i. HRSA reserved the ability to exclude certain annual performance values from the baseline calculation. For example, if in FY 2019 an awardee had an undefined value for a particular measure (denominator value was 0), then the FY 2019 performance value was excluded from the baseline calculation. In this example case, only the FY 2018 performance value was used to calculate the baseline value for that measure.

Welcome! We're glad you've made it here - This tool is designed to enable you to monitor your organizations benchmark performance. Please begin by opening the **Benchmark Measure (Form 2)** report in DAISEY and select the appropriate **reporting year**. From here, note the completion percentage (green bar) for each measure in the "My org status" column below.

To determine improvement, HRSA is defining "improvement" as meeting one or both of the following criteria: 1 – any change in the intended direction for that measure, compared to the baseline, 2 – meeting or exceeding the established threshold for a measure, while simultaneously not decreasing performance from baseline by more than 10%.

Measure	Performance Measure	National Threshold	Baseline Value	FY 2021 Performance	FY2022	FY2022 Missing	# of benchmarks required to improve	FY22 YTD Improvements
1	Preterm Birth	11.0%	11.4%	16.3%	11.6%	0.0%	2	6
2	Breastfeeding	42.7%	38.3%	34.2%	45.5%	2.2%		
3	Depression Screening	80.7%	82.2%	85.6%	86.7%	0.0%		
4	Well Child Visit	66.6%	76.8%	76.8%	81.0%	0.0%		
5	Postpartum Care	67.5%	67.2%	81.4%	87.5%	47.5%		
6	Tobacco Cessation Referrals	53.7%	41.8%	80.0%	84.6%	0.0%		
7	Safe Sleep	54.7%	65.3%	82.7%	85.5%	0.0%	1	3
8	Child Injury	4.0%	10.4%	4.2%	6.0%	0.0%		
9	Child Maltreatment	6.7%	7.5%	9.3%	7.0%	NA		
10	Parent Child Interaction	67.4%	63.6%	63.1%	65.6%	0.0%	1	3
11	Early Language and Literacy Activities	74.6%	77.5%	86.5%	86.6%	0.0%		
12	Developmental Screening	74.8%	65.1%	80.9%	71.8%	0.0%		
13	Behavioral Concerns	91.1%	92.0%	97.7%	89.0%	0.0%		
14	Intimate Partner Violence Screening	80.8%	81.2%	76.7%	90.8%	0.0%	1	1
0	Primary Caregiver Education	29.9%	21.9%	21.6%	21.3%	0.0%	1	1
16	Continuity of Insurance Coverage	79.0%	74.3%	72.7%	74.0%	0.0%		
17	Completed Depression Referrals	41.4%	40.4%	43.6%	63.0%	23.0%	1	3
18	Completed Developmental Referrals	56.8%	87.5%	63.6%	100.0%	21.4%		
19	Intimate Partner Violence Referrals	55.9%	37.9%	60.9%	50.0%	0.0%		