

## IMPROVING PREGNANCY OUTCOMES

Name of Agency \_\_\_\_\_

Grant Year 2016-17

EDUCATION/CONSUMERS	1 <sup>ST</sup>	2 <sup>ND</sup>	3 <sup>RD</sup>	4 <sup>TH</sup>	TOTAL
# of Programs					
# of Participants					

### MEETINGS/PROFESSIONAL EDUCATION

# of Meetings					
# of Participants					

### OUTREACH EVENTS/ACTIVITIES

# of Activities					
# of Participants					

### REFERRALS INITIATED IN REPORT PERIOD

<b>Total Referrals Initiated</b>					
IR not progressed to CHS					
IR refused consent to continue CHS					
IR progressed to CHS during report period (referred to CI)					
IR progressed to CHS during report period refusing consent to CI					
IR progressed to CHS during report period but not referred to CI					
IR progressed to CHS after report period (referred to CI)					
IR progressed to CHS after report period refusing consent to CI					

#### PATIENT TYPE (of referrals initiated in report period)

<b>Initial Referral</b>					
• # Preconception Women					
• # Inter-conception Women					
• # Pregnant Women					
• # Men					
<b>Community Health Screen</b>					
• # Preconception Women					
• # Inter-conception Women					
• # Pregnant Women					
• # Men					

### CHS COMPLETED (in report period)

<b>Total CHS Completed</b>					
CHS completed where IR made in report period					
CHS completed where IR made prior to report period					

### CASE MANAGEMENT

# Preconception Women					
# Interconception women					
# Pregnant Women					
# Fathers with children					

### PREGNANCY TESTING

Negative Pregnancy Test Results					
# referred to Inter-conception Care during this report period					
# referred to Inter-conception Care to date					

Positive Pregnancy Test Results					
# referred to Prenatal Care during this period					
# referred to Prenatal Care to date					

#### SERVICE REFERRALS

<b>REFERRALS Made</b>					
<b>Completed Service Referrals by Outcome</b>					
Appointment Cancelled [P]					
Appointment Kept [P]					
Appointment Rescheduled [P]					
Attempted Contact [P]					
Attempted Contact [R]					
Auto Close					
Contacted [P]					
Contacted [R]					
Did not meet need					
Made Appointment [P]					
Made Appointment [R]					
Met with [P]					
Met with [R]					
Outcome N/A					
Patient No Show [R]					
Unknown Outcome					

#### EDUCATION PROVIDED

<b>Interconception: Education/Conversation</b>					
<b>Interconception: Pamphlets/Handouts</b>					
<b>Male: Education/Conversation</b>					
<b>Male: Pamphlets/Handouts</b>					
<b>Preconception: Education/Conversation</b>					
<b>Preconception: Pamphlets/Handouts</b>					
<b>Pregnant: Education/Conversation</b>					
<b>Pregnant: Pamphlets/Handouts</b>					

#### POPULATION SERVED

# Female					
# Male					
Age <18					
18-25					
26-40					
>40					
White					
Black					
Asian					
Alaskan/Pacific Islander					
Native American					
Hispanic					
Multi-Racial					
Other					

#### PERSONNEL

# of FTE positions in the Grant				
# of Personnel During the Period				

Describe at least one CHW success during the quarter:

**Describe any system challenges or barriers CHW is facing:**

**Describe any challenges or barriers that clients are facing: (include those identified in Consumer Advisory Board, as well)**

## Definitions of Data Values from SPECT / IPO Stats Report

### EDUCATION/CONSUMERS

# of Programs	Count of total educational programs based on the actual date of the event (entered as an "Outreach Event", Event type = Education)
# of Participants	Sum of participants entered under "Total Attend" (entered on the worksheet of an "Outreach Event")

### MEETINGS/PROFESSIONAL EDUCATION

# of Meetings	Count of total programs based on the actual date of the meeting or event (entered on the worksheet of an "Outreach Event", Event type = Meetings)
# of Participants	Sum of participants entered under "Total Attend" (entered on the worksheet of an "Outreach Event", Event type = Meetings)

### OUTREACH

Total # of Contacts	Count of total educational programs based on the actual date of the event (entered as an "Outreach Event", Event type = Outreach)
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### REFERRALS INITIATED IN REPORT PERIOD

<b>Total Referrals Initiated</b>	Initial Referral Forms (IR) completed during the report period, whether or not a CHS has been completed.
IR not progressed to CHS	# of Initial Referral Forms (IR) completed FOR WHICH a corresponding Community Health Screen (CHS) has not yet been completed.
IR refused consent to continue CHS	Client completed Initial Referral, but refused to continue with completion of CHS
IR progressed to CHS during report period (referred to CI)	BOTH an Initial Referral and a CHS were completed during the report period, client consented to referral to Community Based Services, and referral was sent to Central Intake during the report period.
IR progressed to CHS during report period refusing consent to CI	BOTH an Initial Referral and a CHS were completed during the report period. However, client REFUSED consent to referral to Community Based Services, and referral was NOT sent to Central Intake during the report period.
IR progressed to CHS during report period but not referred to CI	BOTH an Initial Referral and a CHS were completed during the report period. However, either "Not needed" selected for CBS on Referrals/Education or CHS was "Saved" (not "Submitted")
IR progressed to CHS after report period (referred to CI)	Initial Referral Form (IR) completed during the report period, but CHS completed AFTER the report period.
IR progressed to CHS during report period refusing consent to CI	Initial Referral Form (IR) completed during the report period, but CHS completed AFTER the report period. However, client REFUSED consent to referral to Community Based Services, and referral was NOT sent to Central Intake.
<b>PATIENT TYPE (of Initial Referral Forms in report period)</b>	
# Preconception Women	Based on what is reported on the Initial Referral Form.
# Inter-conception Women	Based on what is reported on the Initial Referral Form. Also includes post-partum women from PRAs.
# Pregnant Women	Based on what is reported on the Initial Referral Form. Also includes pregnant women from PRAs.
# Men	Based on what is reported on the Initial Referral Form
<b>PATIENT TYPE (of completed CHS Forms in report period)</b>	
# Preconception Women	Based on what is reported on the Initial Referral Form.
# Inter-conception Women	Based on what is reported on the Initial Referral Form. Also includes post-partum women from PRAs.
# Pregnant Women	Based on what is reported on the Initial Referral Form. Also includes pregnant women from PRAs.
# Men	Based on what is reported on the Initial Referral Form

### CHS COMPLETED (in report period)

Total CHS completed	Total # of CHS completed, regardless of date of Initial Referral form.
CHS completed where IR made in report period	CHS Completed where Initial Referral made in report period <ul style="list-style-type: none"> <li>Date of Initial Referral Form is within report period.</li> </ul>
CHS completed where IR made prior to report period	CHS Completed where Initial Referral made prior to report period <ul style="list-style-type: none"> <li>Date of Initial Referral Form is prior to report period.</li> </ul>

#### CASE MANAGEMENT

- The numbers reported under CASE MANAGEMENT include only those clients with status of “Pending enrolled” or “Enrolled” at any time during the date range for the reporting period. This is independent of date of referral.

# Preconception Women	Based on what is reported on the Initial Referral Form.
# Pregnant Women	Based on what is reported on the Initial Referral Form. Also includes post-partum women from PRAs.
# Inter-conception Women	Based on what is reported on the Initial Referral Form. Also includes pregnant women from PRAs.
# Fathers (with children)	Based on what is reported on the Initial Referral Form

#### PREGNANCY TESTING

- Based on Date of Initial Referral Form
- All Pregnancy Testing data is pulled from the Initial Referral Form, “Program Use Only” section.
- Pregnancy Testing should ONLY be reported by those agencies which are actually providing testing. Self-reported client results should NOT be reported in SPECT.

# Negative Results	Based on value entered on Initial Referral Form
# Referred to Inter-conception Care	# of women with Negative Results referred via Referrals/Education
# Positive Results	Based on value entered on Initial Referral Form
# Referred to Prenatal Care	# of women with Positive Results referred via Referrals/Education

#### SERVICE REFERRALS

Service Referrals Made	Based on date actual Service Referral was made, independent of date of Initial Referral Form or CHS.
Outcomes	Based on date the Service Referral was closed, independent of on date actual Service Referral was made or date of Initial Referral Form or CHS. Total Outcomes IS NOT EQUAL to Total Service Referrals Made-they are each based on different date ranges. A “close” date within the reporting is REQUIRED in order to count the outcome in the report. Outcomes with no date entered will not appear in any report. <ul style="list-style-type: none"><li>[P] indicates information/status provided by client.</li><li>[R] indicates information/status provided by provider or agency.</li><li>Note that if zero Service referrals were completed, nothing will appear under it.</li></ul>

#### EDUCATION PROVIDED

- The date of the education provided is the same date as the contact to which education is linked, regardless of when it is actually entered. (For example, if a contact is recorded 3/31/17, but the education is not recorded under that contact until May 15, the education will appear on the report for the 3<sup>rd</sup> quarter, not the 4<sup>th</sup>.)

#### POPULATION SERVED

- Based on the actual date of the event (entered on the worksheet of an “Outreach Event”)
- Based on the participants’ demographic information entered under Event Attendees Totals (Age, Race, Ethnicity, Gender, and Outreach).
- This data IS NOT from Initial Referral Forms or CHSs.
- Does not include any participants from Meetings/Professional Education.
- Includes participants from Outreach and Education only.
- NB: Numbers may not equal total # of contacts for Outreach (in Section 3) if demographic data not captured and recorded for every participant.