

Guidelines for HFNY PI #9
How to Use the 12-2.B MIS Report
and How to Document Observations in the
MIS

August 2022

Guidelines for PI #9 – Observations by Supervisor

- For Regular Programs, the requirements are:
 - FSS – 4 observations by supervisor per year. BPS – perform quarterly
 - FRS – 2 observations by supervisor per year. BPS – perform every 6 months or more frequently
 - Dual Role – 2 HV observations and 1 Assessment (FROG) per year or more frequently

More info: <https://www.healthyfamiliesnewyork.org/Staff/support.htm>
- For CE Programs, the requirements are:
 - 1 Welcome Family Visit, 2 HV, and 1 Assessment observation
 - The WFV is listed as a HV observation in the 12-2.B MIS Report.

Guidelines for PI #9 – Observations by Supervisor

- 12-2.B MIS Report
- We run the report for the previous year. Thus:
 - For the October 2022 PIs,
We will run the report from 10/1/2021 – 9/30/2022.
 - For the April 2023 PIs,
We will run the report from 4/1/2022 – 3/31/2023.
 - (Just change the year forward to adjust the date range for subsequent PI cycles)
- To prepare for the PIs, we recommend you use these future dates rather than the default dates.

Guidelines for PI #9 – Observations by Supervisor

- The Summary Section of the 12-2.B MIS Report lists how many workers are meeting for PI# 9 for the given date range
(ex. 2 of 4 FSSs, 1 of 3 FRSs, 3 of 8 Dual Role workers)
- The Details Section of the 12-2.B MIS Report lists each worker and her/his status for observations in the given date range. The Details Section can be used to determine how many more observations a given worker needs and the schedule for these observations.
- If a worker's name is greyed out, s/he does not count because:
 - her/his first HV/Assessment date was after the start date requested for the report
 - OR s/he is a Supervisor or Program Manager

Guidelines for PI #9 – Observations by Supervisor

- Only one visit of the same type counts per month. Thus:
 - If a worker has 2 HV observations in the same month, only one will count.
 - If a Dual Role worker has 1 HV observation and 1 FROG observation in the same month, both will count because they are observations of different types.
- The Best Practice guidance is to not conduct observations with the same family. However, this is still allowed for meeting PI #9.
- In the Details Section of the 12-2.B Report, each observation for each worker is listed, and there is a column for “Meets Req’s”, Y or N.

How to Document HV Observations in the MIS – Use the HV Log –

Home Visit Log

PC1ID: _____ Date of Visit: _____ TC Age: _____

Visit Information | CHEERS/... | Parent-Child... | Health of TC... | Family Functioning/... | Concrete Activities/... | Program Activities/... | Family Goal Plan/... | Parents' Response/... | MIECHV Only

Visit Information

Home Visitor's name: _____ Date of Visit: _____ Start Time of Visit: _____ --Select--

Type of Visit (Check any of the first 4 options that apply. The rest of the options can only be selected and de-selected individually.)

- 1. In **Primary Caretaker** 1's home, where TC resides
- 2. In **Father Figure's/OBP's** home, where TC resides
- 3. In **other location/home**, where TC resides, e.g. hospital-extended stay, grandparent or guardian's
- 4. **Outside** of PC1's or Father Figure's/OBP's home
- 5. **Virtual Visit (telephone only)**
- 6. **Virtual Visit (interactive platforms)**
- 7. **Attempted** - Family not home or unable to meet after visit to home (DO NOT complete rest of the Home Visit Log)

If outside participants' home, where? (select one) --Select--

If virtual (non-Group) or outside participants' home, why? (select one) --Select--


Total Length of Visit

Hours	Minutes
_____	_____

Who participated in this home visit? (check all that apply)

- Primary Caregiver 1
- Primary Caregiver 2
- Other Biological Parent
- Target Child Siblings
- Home Visiting Program Supervisor
- Observation by Supervisor

Check Home Visiting Program Supervisor and the Observation by Supervisor box will open



How to Document Assessment (FROG) Observations in the MIS

– Use FROG Form –

Family Resilience & Opportunities for Growth Scale (FROG)

Identifying Info | FROG Scale | Demographics | PC1 History | PC1 Attitudes | HITS/Audit-C/PHQ2 | PC1 Issues

1. Primary Caregiver 1's Identifier: FF89360375005

2. FROG Date: 08/08/22

3. Worker: Test, FRS

4. Primary Caregiver's Name: [REDACTED]

5. Primary Caregiver 1's Address:

6. Expectant/new parent phone (no phone)
Home phone:
Cell phone:
Work/Emergency phone:

7. Due Date or Target Child's DOB: 08/21/22


8. Enter Numbers:
Gravida: (Pregnancies)
Parity: --Select-- (Live Births)

9. Prenatal Care: Received/Receiving ? --Select--

11. Who was present during the Assessment?
(check all that apply)
 1. Mother of baby (MOB)
 2. Father of baby (FOB)
 3. Current partner of MOB
 4. Current partner of FOB
 5. Grandparent of TC
 6. Other

12. Email address:

13. Observation by Supervisor:



Thank you!

Please contact us with any questions

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