

THE MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAM

FORM 4 QUARTERLY PERFORMANCE REPORT TOOLKIT

September 2025



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The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

Form 4 Toolkit

Overview

The purpose of this toolkit is to support awardees in collecting and reporting quality, consistent, and accurate data for Form 4. Guidance provided in this toolkit complements the [Key Definitions section](#) of Form 4 on the MIECHV Data & CQI website.

As a reminder, Form 4 is reported on the following schedule:

Reporting Quarter	Data Collection Period	Report Due Date
Q1	October 1-December 31	February 15
Q2	January 1-March 31	May 15
Q3	April 1-June 30	August 15
Q4	July 1-September 30	November 15

Considerations & FAQs

Before completing your Form 4 report, ensure your Project Officer has approved your most current Attachment 2: MIECHV Communities, Local Implementing Agencies, Caseload of Family Slots. Deviations between Attachment 2 and your Form 4 report are likely to require additional justification and/or discussion.

1. Do we report combined data from all active grants in one report?

Yes. Submit one report that reflects activities across all currently active X10 grants using federal base and matching funds.

2. Do we report data cumulatively over the reporting period or point-in-time at the end of the reporting period?

Some of the required data points are reported cumulatively over the quarter, and some are reported point-in-time. Please see the definitions, by table, below for more information. The [Definitions of Key Terms section](#) also provides additional details.

3. Do we need to report quarterly data if it is not collected under the model(s) we are implementing?

Yes. We require you to collect all data reported via Form 4, even if it is not collected under the model(s) you have chosen to implement.

4. Do we need to report data on non-MIECHV-funded services via Form 4?

No. Do not include data on non-MIECHV families or non-MIECHV funded staff via Form 4. Do not include any data on families served with non-federal matching funds.

[See Appendix A](#) for more guidance on defining a MIECHV Household and what to do when household status changes occur. Please see the definitions and FAQs below, by table, for more information.

Table A.1: Program Capacity

Column A	Column B	Column C	Column D	Column E
Number of New Households Enrolled	Number of Continuing Households	Current Caseload (A+B) (Auto-Calculates)	Maximum Service Capacity	Capacity Percentage (C÷D*100) (Auto-Calculates)

Table A.1: Overview

Column	Measure	Instructions
Column A <i>Point-in-Time</i>	Number of New Households Enrolled	Enter total number of households that sign up to participate in the home visiting program at any time during the quarterly reporting period and continue to be enrolled at the end of the reporting period. The household can include a pregnant woman or caregiver or multiple caregivers depending on model-specific definitions.
Column B <i>Point-in-Time</i>	Number of Continuing Households	Enter total number of households, including a pregnant woman and/or caregiver, that signed up and actively enrolled in the home visiting program prior to the beginning of the quarterly reporting period and continued to be enrolled at the end of the reporting period. The household may include multiple caregivers depending on model-specific definitions.
Column C (A+B) <i>Auto-Calculates</i>	Current Caseload	Auto-calculated field. Represents the number of households actively enrolled at the end of the quarterly reporting period. All members of one household represent a single caseload slot.
Column D <i>Prepopulates after Quarter 1 and is locked for editing</i> <i>Should match Attachment 2</i>	Maximum Service Capacity	Enter the highest number of households that could potentially be enrolled at the end of the quarterly reporting period if the program were operating with a full complement of hired and trained home visitors.
Column E (C÷D*100) <i>Auto-Calculates</i>	Capacity Percentage	Auto-calculated field. Results from dividing the current caseload by the maximum service capacity and multiplying by 100.

Table A.1: Considerations & FAQs

The maximum service capacity must align with the proposed caseload of family slots in the most recently approved Attachment 2: MIECHV Communities, Local Implementing Agencies, Caseload of Family Slots. Contact your Project Officer if the numbers differ.

Please note that the maximum service capacity is different from the total number of households served during the reporting period. The caseload of family slots may vary by federal fiscal year, depending on available funding.

1. Section A.1, Columns A and B ask for the total number of new households and continuing households. Since this is over a three-month time frame, a family can potentially enroll, then disengage, and a new (different) family may then enroll. How would these households be reported on Table A.1?

Both columns A and B are point-in-time data points, meaning the number of new and continuing households are reported as those enrolled **at the end** of the quarterly reporting period.

For example, a family that enrolls during the reporting period then disengages before the end of the reporting period would not be included in this table. Do include this family in Table A.3: Family Engagement, under the relevant category.

2. What does it mean for a household to be “enrolled” during the reporting period for Form 4? Does a family need to have received a home visit during the reporting period to be considered enrolled?

Follow model-specific criteria to determine whether a household meets the definition of enrolled to report for Form 4. Table A.1 reflects point-in-time data based on the end of the quarterly reporting period.

3. How do we update the maximum service capacity?

If the maximum service capacity changed from what was in the most recent approved Attachment 2, provide your Project Officer with the updated capacity and justification. This may require the submission of a Prior Approval Request, if appropriate. Reasonable scenarios for updating the maximum service capacity may include but are not limited to the expansion of services in an existing LIA or the execution of a contract with a new LIA. After Quarter 1, Column D maximum service capacity will prepopulate, and you will not be able to edit it. Once your Project Officer approves the update to the maximum service capacity, they will facilitate the update in EHB.

4. For the personnel cost method, does 25% of a home visitor’s FTE need to be covered at each monthly invoice to count towards a MIECHV household? Should the home visitor always have a 25% of their monthly invoice covered by MIECHV or is a 25% of their FTE annually covered by MIECHV acceptable?

We recommend using annual or annual average funding, rather than quarterly or monthly funding, in determining the 25% threshold under the home visitor personnel cost method. As a reminder, the home visitor personnel cost method distinguishes families considered MIECHV as served by home visitors for whom at least 25% of their personnel costs (salary/wages including benefits) are paid for by MIECHV funding.

Table A.2: Place-Based Services

Column A	Column B	Column C	Column D
Local Implementing Agency (LIA) Organization Name	LIA Address	Counties	Evidence-Based Home Visiting Models or Promising Approaches

Table A.2: Overview

Column	Measure	Instructions
Column B <i>Prepopulates after Quarter 1</i>	LIA Address	Enter only one address per LIA. The LIA address should reflect the physical address of the organization's main office, which may not directly reflect the service delivery area. If an LIA has multiple locations or addresses and does not have a physical main office location, report the LIA address that most accurately reflects where services are delivered. You may add as many rows as needed to capture each LIA in your program.
Column C <i>Prepopulates after Quarter 1</i>	Counties	Enter counties that reflect geographic distribution of households served by the LIA during the quarterly reporting period. Note that the same county can be served by multiple LIAs.
Column D <i>Prepopulates after Quarter 1</i>	Evidence-Based Home Visiting Models or Promising Approaches	Enter evidence-based home visiting models or promising approaches implemented by the LIA. For LIAs implementing multiple models during the quarterly reporting period, all models implemented should be listed for that LIA. Enter all models implemented by the LIA in the same row.

Table A.2: Considerations & FAQs

All of the data in Table A.2 pre-populates after Quarter 1. Be sure to verify that the pre-populated information is accurate for the reporting period and update as needed.

1. What LIA address should be submitted in Column B if it has multiple offices or locations?

Submit only one address per LIA, even if the LIA has multiple locations or addresses. The LIA address should reflect the physical address of the organization's main office. If an LIA has multiple locations or addresses and does not have a physical main office location, report the LIA address that most accurately reflects where services are delivered.

2. Should we update Column C quarterly based on the actual clients served during that reporting period, or is this a static list of counties originally stated as the reach of the LIA?

You should update the counties each quarter based on families served by the LIA during the reporting period. If the list of counties deviates from the counties included in the approved Attachment 2, please provide a comment as to why.

3. How should we report a family that has moved to a new county that is not in the approved Statewide Needs Assessment?

HRSA's guidance is generally to follow a family and continue services if possible. If a family temporarily moves to a county not approved in your most recent Needs Assessment, provide a comment indicating their circumstances. MIECHV families may move, be in transitional housing, or have some other housing arrangements. If a family permanently moves to a county not approved in your most recent Needs Assessment, you should transition the family to other non MIECHV funded services, if applicable, and report accordingly.

4. How should we report if we do not have Local Implementing Agencies (LIAs)?

You should enter the address that reflects the physical address of your organization's main office, which may not directly reflect the service delivery area.

Table A.3: Family Engagement

Column A	Column B	Column C	Column D	Column E
Number of Households Currently Receiving Services	Number of Households who Completed Program	Number of Households who Stopped Services Before Completion	Other	Total (A+B+C+D) (Auto-Calculate)

Table A.3: Overview

Column	Measure	Instructions
Column A <i>Point-in-Time</i>	Number of Households Currently Receiving Services	Enter the number of households that are participating in services at the end of the quarterly reporting period.
Column B <i>Cumulative over the reporting period</i>	Number of Households who Completed Program	Enter the number of households who have completed the program or transitioned to another program according to home visiting model-specific definitions and criteria during the quarterly reporting period.
Column C <i>Cumulative over the reporting period</i>	Number of Households who Stopped Services Before Completion	Enter the number of households who stopped services before completion – those who left the program for any reason prior to completion - during the quarterly reporting period.
Column D <i>Cumulative over the reporting period</i>	Other	Enter the number of households who do not fall into the previous categories. This may include families that are on hold or otherwise not receiving services post-enrollment but not yet exited (completed or stopped services) from the program. (i.e., the family is not regularly participating but did not actively sever ties, etc.) If you are unsure how to best categorize a household, refer to model-specific definitions and criteria.
Column E (A+B+C+D) <i>Auto-Calculates</i>	Total	This is an auto-calculated field that sums all categories above in Table A.3

Table A.4: Staff Recruitment and Retention

Column A	Column B	Column C
Number of FTE MIECHV Home Visitors	Number of FTE MIECHV Supervisors	Number of FTE MIECHV Other Staff

Table A.4: Overview

Column	Measure	Instructions
Column A <i>Point-in-Time</i>	Number of FTE MIECHV Home Visitors	Enter the number of FTE home visitors who are employed with a contracted local implementing agency at the end of the quarterly reporting period.
Column B <i>Point-in-Time</i>	Number of FTE MIECHV Supervisors	Enter the number of FTE supervisors who are employed with a contracted local implementing agency at the end of the quarterly reporting period.
Column C <i>Point-in-Time</i>	Number of FTE MIECHV Other Staff	Enter the number of FTE other staff are employed with a contracted local implementing agency at the end of the quarterly reporting period.

Table A.4: Considerations & FAQs

Awardees should only report the proportion of the FTE that is supported by MIECHV grant funds. For example, a 1.0 FTE staff member who is supported at 30% through MIECHV funds and 70% through other funds is reported as a 0.3 FTE.

1. Is Table A.4 reporting point-in-time numbers or cumulative over the reporting period?

Table A.4 is point-in-time data of the FTEs employed at the end of each quarterly reporting period. You should only report the proportion of the FTE that is supported by MIECHV grant funds.

2. The available categories for reporting are Home Visitor, Supervisor, and Other. LIA staff have a variety of job titles, depending on the agency and model. Is there a federal definition that would help classify FTEs?

Classify staff in the category that most closely aligns with their responsibilities. If the staff member has multiple responsibilities (i.e. home visitor and supervisor), the proportion of time spent in each role and funded by MIECHV should be reported accordingly. For example, for a staff member that spends 25% of their time providing home visits and 75% of their time supervising other staff and is supported 100% by MIECHV funds, they should be reported as 0.25 FTE home visitor and 0.75 FTE supervisor. MIECHV-funded LIA staff who do not have home visitor or supervisor responsibilities should be reported under Other FTE.

3. How should staff on temporary leave be reported? For example, if a home visitor goes on parental leave during a quarter, and is not working as of the last day of the quarter, would the position be “vacant”?

Staff on temporary leave should be reported according to the FTE of their position that is currently being supported by MIECHV funds at the end of the quarterly reporting period. If staff on leave do not receive any funding from MIECHV during the quarter, you should not report their FTE in Table A.4 for that quarter.

4. For Table A.4, should we report FTEs according to what is budgeted or what is invoiced?

You should report FTEs according to what was supported by MIECHV funding at the end of the quarterly reporting period, not what they were budgeted for. For example, if a staff member was budgeted to receive MIECHV funding but did not, you should not report their FTE in Table A4.

5. How should we report if we do not have Local Implementing Agencies (LIAs)?

You should enter the number of full-time equivalent MIECHV-funded home visiting staff who are employed with your organization at the end of the quarterly reporting period.

APPENDIX A: Definition of a MIECHV Household

For the purposes of reporting to HRSA on performance reporting Forms 1, 2, and 4, a “MIECHV household” is defined as a family served during the reporting period by a trained home visitor implementing services with fidelity to the model and that is identified as a MIECHV household at enrollment. HRSA has identified two different methods that can be used to identify MIECHV households that are described below:

1. *Home Visitor Personnel Cost Method:* Families are designated as MIECHV at enrollment based on the designation of the home visitor they are assigned. Using this methodology, recipients designate all families as MIECHV that are served by home visitors for whom at least 25 percent of his/her personnel costs (salary/wages including benefits) are paid for with MIECHV funding.
2. *Enrollment Slot Method:* Families are designated as MIECHV families based on the slot they are assigned to at enrollment. Using this methodology, recipients identify certain slots as MIECHV-funded and assign families to these slots at enrollment in accordance with the terms of the contractual agreement between the MIECHV state recipient and the LIA regardless of the percentage of the slot funded by MIECHV.

Once designated as a MIECHV household, the household is tracked for the purposes of data collection through the tenure of household participation in the program.

MIECHV Household Status Changes

The revised definition of a MIECHV household includes the following language: “Once designated as a MIECHV family, the family is tracked for the purposes of data collection through the tenure of family participation in the program.” This language was included to encourage continued data collection on MIECHV families for the purpose of documenting outcomes as a benefit for families, programs, and awardees. In addition, the language is meant to limit shifts in participant status, particularly as it relates to temporary changes in participant status, in order to promote stability and consistency in provision of services.

Temporary Household Status Changes

It is HRSA’s understanding that in most circumstances, efforts are taken to minimize changes in participant status (i.e., changing from a MIECHV home visitor/slot to a non-MIECHV home visitor/slot, or vice versa), and any changes that do take place are generally permanent in nature. However, there are some circumstances that may warrant a temporary change in status. For example, a home visitor goes on family leave or extended medical leave, or a position is temporarily vacant, and families may not be able to transfer to another MIECHV home visitor/slot. In these cases, families may need to switch to a non-MIECHV home visitor/slot until they can return to the MIECHV home visitor’s caseload/MIECHV slot. In these instances, if an awardee is deeming the transfer as temporary, HRSA’s MCHB would expect continued data collection and reporting on these families.

- **Forms 1 and 2:** Data should continue to be reported on families, counting data as unknown/missing if it is unable to be provided.
- **Form 4:** Because HRSA’s MCHB would anticipate that the slot for this family is being held for a defined period of time, we expect them to continue to be reported as part of the current caseload numbers in Table A.1, and that they would continue to be reported as currently receiving services in Table A.3.

Permanent Household Status Changes: MIECHV to Non-MIECHV Household

- **Forms 1 and 2:** If an awardee is considering the status change as permanent, awardees should consider if it is feasible to continue to collect and report MIECHV data. For programs that continue data collection and reporting, awardees should continue to report data for those participants for Forms 1 and 2, while maintaining the family status as “currently receiving services” on [Table 17](#) (Family Engagement). For programs that are not

able to continue data collection and reporting for MIECHV, awardees should count families under “stopped services before completion” on Table 17.

- **Form 4:** In both instances these families would no longer be counted towards current caseload numbers in Form 4 and should therefore be reported under “stopped services before completion” on Table A.3.

Permanent Household Status Changes: Non-MIECHV to MIECHV Household

- **Forms 1 and 2:** If an awardee is considering the status change as permanent, participant information should be collected and reported effective the household status change. If available, participant information prior to household status change should be reported as feasible. If participant information prior to household status change is unavailable, count data as “Unknown/Did Not Report”. The date of enrollment should be used to determine inclusion in Form 1 and 2 reporting.
- **Form 4:** If an awardee is considering the status change as permanent, families should be counted towards current caseload numbers, using the date of enrollment to determine inclusion in new and continuing reporting categories.