

## Home Visitor Guidance for MIHP Outcomes Survey Administration

### Healthy Moms, Healthy Babies MIHP Pilot

As part of Governor Whitmer’s [Healthy Moms, Healthy Babies](#) initiative, the Governor has asked the Michigan Department of Health and Human Services (MDHHS) to pilot an enhancement of MIHP services to explore how MIHP provider agencies can help address social determinants of health for the families they serve. MDHHS has partnered with the University of Michigan Youth Policy Lab to conduct an evaluation of these enhancements to MIHP services. The goal of this project is to understand whether expanding the services for which MIHP providers can bill can better help meet families’ needs.

#### *MIHP Provider Agency Role*

Participating MIHP provider agencies will be able to bill for a discharge visit for all enrolled maternal and infant beneficiaries designated as “high risk” based on the Maternal Risk Identifier (MRI) or Infant Risk Identifier (IRI) conducted at enrollment. Some participating agencies will also be able to bill for additional services like care coordination or extended visits. **All participating agencies will be administering the brief MIHP Outcomes Survey during the discharge visit. For high-risk beneficiaries who do not complete a discharge visit, agencies will be asked to send the family a link to the survey via text message.**

#### *Home Visitor Role*

Home Visitors will be administering the MIHP Outcomes Survey to eligible beneficiaries at the discharge visit. The survey has questions for families on their background, experiences, and interactions with MIHP, as well as a section for Home Visitors themselves to complete. Administration should last 8-10 minutes, but Home Visitors should be prepared to spend additional time in case the survey leads to further questions or conversation.

Both the family’s and the Home Visitor’s responses will be confidential. No names will be collected, and only the Youth Policy Lab team will have access to individual responses. Home Visitor responses will only be reported when grouped together, or aggregated, to ensure that responses are not identifiable.

To ensure that families feel comfortable answering survey questions fully and honestly, *Home Visitors should provide sufficient time and space for families to complete the survey privately during the visit.* However, if a family asks for assistance with the survey, Home Visitors may do so.

### Survey Administration Options

There are three options for administering the MIHP Outcomes Survey at the discharge visit.

*Option 1 (PREFERRED)* is the online survey administered on the same device. In this option, both the Home Visitor and the family take turns completing their sections of the survey on the same web-enabled device (i.e., phone, tablet, laptop). This option is available for in-person discharge visits only and is the preferred method of administration.

*Option 2* is the online survey administered on separate devices. In this option, the Home Visitor and the family complete their sections of the survey simultaneously on their own separate web-enabled

devices. This can occur at in-person visits where same device administration is not possible or during telehealth visits.

*Option 3* is the paper survey. When online survey administration is not possible for families at in-person discharge visits, the family fills out a paper copy of the survey instead, while the Home Visitor completes their section of the online survey when next able to do so.

A link to the online version of the survey is available on the [MIHP website](#) along with other Healthy Moms, Healthy Babies MIHP Pilot materials. Paper versions of the survey and consent forms are also made available to participating agencies. Both online and paper versions of the survey are provided in English, Spanish, and Arabic. The following pages describe in more detail how to administer the survey.

## MIHP Outcomes Survey Administration Options

### Option 1: Online Survey - Same Device (PREFERRED)

For in-person discharge visits, Home Visitors and families can both complete the online survey on the same web-enabled device during the discharge visit. *This is the preferred administration option for in-person discharge visits.*

Below are the steps for Home Visitors to follow during survey administration on the same device at an in-person discharge visit.

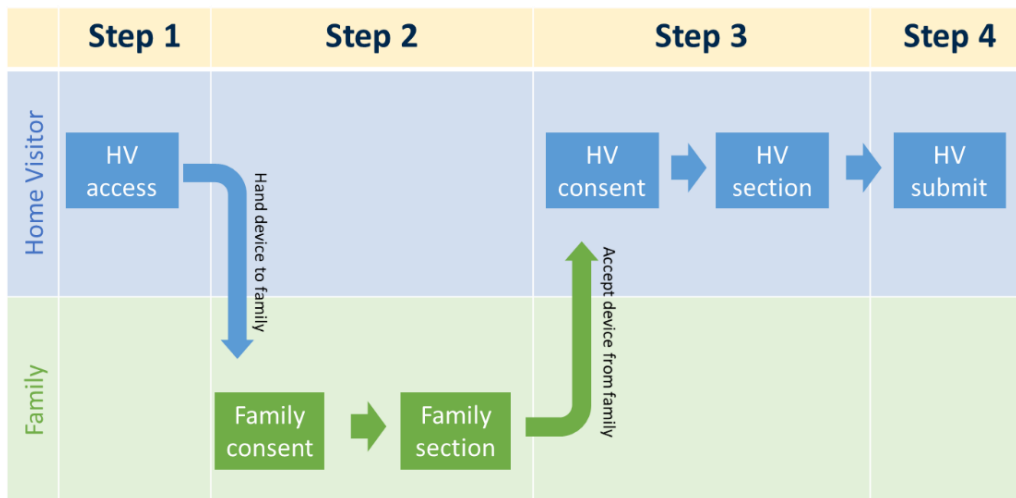
**Step 1:** Access the survey on your device via the MIHP Outcomes Survey link provided on the [MIHP website](#).

**Step 2:** Hand the device to the family to complete their consent form and answer questions in their section of the survey confidentially. During this time, please give the family sufficient time and space to complete the survey privately. *Suggested activities while you wait: filling out paperwork, stepping away.*

**Step 3:** Accept the device back when the family is finished with their section of the survey, then complete the Home Visitor consent form and section on the device.

**Step 4:** Submit the survey.

The figure below shows the survey sequence for same device administration at an in-person discharge visit. (Home Visitor steps are in blue; family steps are in green)



### Option 2: Online Survey - Separate Devices

For discharge visits where same device administration is not possible—including telehealth visits—Home Visitors can administer the online survey on separate devices.

*If it is not possible for the Home Visitor and the family to complete the survey while remaining connected during a telehealth discharge visit, the Home Visitor will send the family a link to the survey via email*

and/or text at the end of the visit. Home Visitors will wait to complete their section of the survey until immediately after the visit.

Below are the steps for Home Visitors to follow during survey administration on separate devices at the discharge visit.

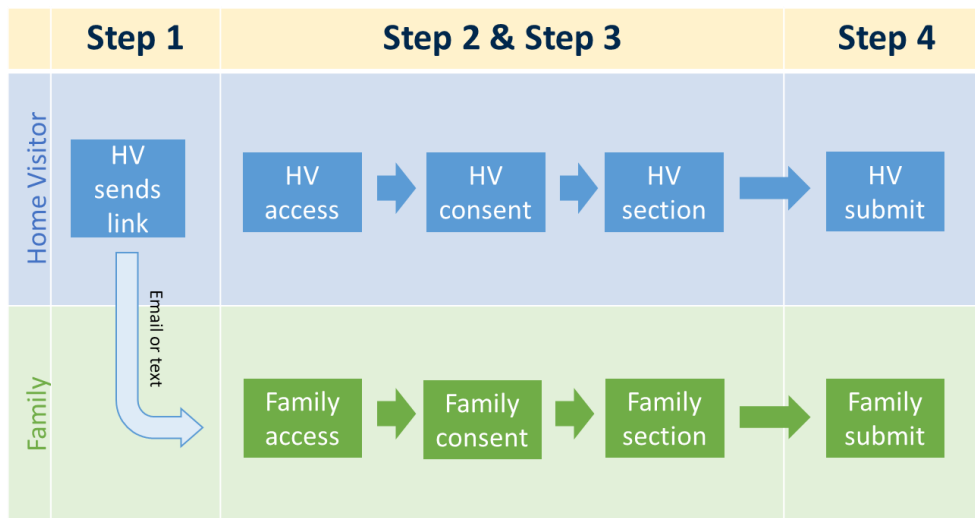
**Step 1:** Provide the family with the MIHP Outcomes Survey link, available on the MIHP website, via text or email.

**Step 2:** Allow the family to complete their consent form and section of the survey on their device. During this time, please give the family sufficient time and space to complete the survey privately. *Suggested activities while you wait: muting oneself, stepping away.*

**Step 3:** Complete the Home Visitor consent form and section on your device at the same time.

**Step 4:** Submit the surveys.

The figure below shows the survey sequence for separate device administration at the discharge visit. (Home Visitor steps are in blue; family steps are in green)



### Option 3: Paper Survey

For in-person discharge visits where Home Visitors are unable to administer the survey on a web-enabled device, a paper version of the survey can be administered instead. The Youth Policy Lab will provide paper versions of the consent form and survey, as well as pre-paid, pre-addressed envelopes, to participating agencies so that the surveys can be mailed directly to the Youth Policy Lab after administration. *Consent forms are provided for the family to keep for their reference. They should not be signed nor returned when mailing back the survey.*

Below are the steps for Home Visitors to follow during administration of the paper version of the survey at an in-person discharge visit.

**Step 1:** Provide the family with a paper copy of the consent form, survey, and a pre-paid, pre-addressed envelope.

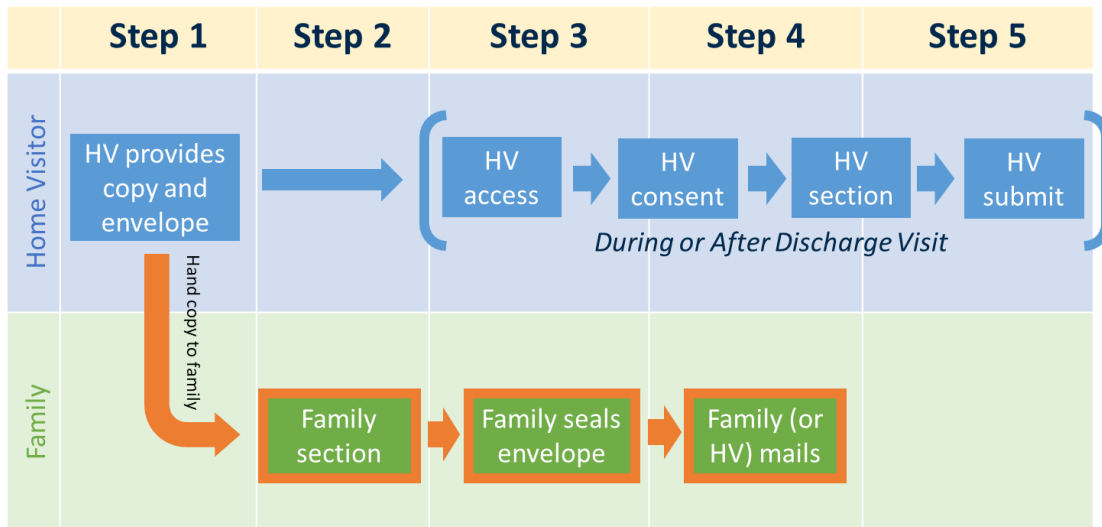
**Step 2:** Allow the family to complete the survey confidentially. During this time, please give the family sufficient time and space to complete the survey privately. *Suggested activities while you wait: filling out paperwork, stepping away.*

**Step 3:** Have the family insert the survey into the envelope and write “PRIVATE” across the seal to ensure privacy. *The family should not sign or include the consent form in the envelope as it is provided for their reference only.*

**Step 4:** Place the envelope in the mail. Either you or the family can do this, depending on their preference.

**Step 5:** Complete and submit the Home Visitor section of the online survey at the same time or after the visit if necessary.

The figure below shows the survey sequence for paper survey administration at an in-person discharge visit. (Home Visitor steps are in blue; family steps are in green)



### Family Survey Accessibility

In cases where the family is unable to read the consent form or survey, the Home Visitor should leave a copy of the family survey, consent form, and pre-paid envelope for them to complete after the visit. Home Visitors should refrain from walking the family through the survey personally as it may inhibit their candor when asked about their MIHP experience.

However, if the family specifically asks the Home Visitor to help them respond to the survey, the Home Visitor should first explain the sensitive nature of some of the survey items. If the family still desires assistance, the Home Visitor may help them, but they should still try to provide the family as much privacy as possible, particularly for questions related to their home visiting experience. Additionally, if the Home Visitor leaves the survey with the family, the family should be warned that the survey

contains sensitive information that they may not feel comfortable sharing with their children or other family members.

### Family Survey Declination

In cases where the family declines to complete their section of the survey during either a telehealth or in-person discharge visit, the Home Visitor will wait to complete their section of the online survey until immediately following the visit.

### Survey Administration for Beneficiaries Without a Discharge Visit

For eligible beneficiaries who did not receive a discharge visit (i.e., you lost contact with the family or they declined MIHP services prior to the end of MIHP services or a discharge visit), participating agencies and Home Visitors will be asked to help ensure that their experiences are captured in the MIHP Outcomes Survey as well. The table below provides the criteria for identifying these beneficiaries and outlines staff responsibility for administering the MIHP Outcomes Survey in these cases.

For Beneficiaries who...	MIHP Agencies <sup>1</sup> will be responsible for...	Home Visitors will be responsible for...
<ul style="list-style-type: none"> <li>Were identified as “high risk” on the IRI or MRI <b>AND</b></li> <li>Were enrolled after the pilot round start date <b>AND</b></li> <li>Have not yet received a discharge visit <b>AND</b></li> <li>Have not been successfully reached in the past <u>120 days</u> <b>OR</b> are considered discharged by the agency</li> </ul>	Inviting families to complete the online MIHP Outcomes Survey via text message	Completing the Home Visitor section of the MIHP Outcomes Survey for their assigned families at the time the survey link is sent to the family

To administer the MIHP Outcomes Survey to a beneficiary who did not receive a discharge visit, participating MIHP agencies will provide a special survey version link via text message<sup>2</sup> using the script below. At the same time, the most recently assigned Home Visitor will complete their section of the MIHP Outcomes Survey based on their past experience with that beneficiary. The survey administration sequence is similar to Option 2 above.

- **Text Message Script:** “Hello from \_\_ (insert agency name) \_\_. We would love to hear about your recent experience with MIHP. Please fill out a brief, anonymous survey and receive a \$10 gift card. Click here: [tinyurl.com/MIHPsurvey](http://tinyurl.com/MIHPsurvey).”

In order to compensate families for their time and to incentivize survey completion, beneficiaries who did not receive a discharge visit but completed the MIHP Outcomes Survey will be provided with a \$10 gift card. For every survey completed by these beneficiaries, the MIHP agency will also be provided with

<sup>1</sup> MIHP agencies can determine which staff member (i.e., clerk, Home Visitor) will be responsible for outreach.

<sup>2</sup> If sending link via text is not an option, the same message can be sent to the beneficiary’s email address if known.

\$10. These payments will be provided in a lump sum once every 6 months, and agencies may determine how to best use these funds.