

2023 Site Profile Report Guide

The Site Profile Report informs HFA's quality assurance and national efforts, helps national and regional HFA staff understand and respond to the needs of the network, and promotes HFA with a national voice. We appreciate the time you spend to provide this information!

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Site Characteristics](#)

[Jump to
Family Data](#)

[Jump to
Financial](#)

[Jump to
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General Instructions:

The items are listed in this report as a resource: please DO NOT report your data on this document. Enter all data in HFAST!

- ★ Log in to HFAST and select *Site Profile Report* under the Site tab. If you're logging onto HFAST for the first time, see the Getting Started in HFAST guide. For other questions, you can find HFAST topics or the SPR page in Network Resources. Links to documents in this guide will take you Network Resources.

[HFAST](#)

[Getting Started in
HFAST](#)

[SPR Page in
Network
Resources](#)

[Excel version
of this guide](#)

Gray link buttons indicate a resource that is not yet updated for the 2023 SPR but will be prior to the 2023 SPR Opening Day.

- ★ Click the tabs on the Site Profile Report page to move between sections Site Characteristics, Family Data, Financial, and Program Policy. For each tab, find the row labeled 2023 and click "Edit". Enter your information. As you navigate through the sections within the tab, HFAST will temporarily save your progress. You will still need to click "Save Progress/Submit Data" at the bottom of each tab to save your information. You can Save Progress even if you have not completed the data entry as you are able to return to your work and re-submit at any time. You may have to scroll down to see the "Save Progress/Submit Data" button.
- ★ We recommend that sites print out this guide and use it to jot down responses as a paper back-up of your HFAST entries. This guide is also available in Excel.

- ★ All data requested on the Site Profile Report is required unless otherwise noted. Items that are not required appear in this guide shaded in gray.
- ★ Changes to this year's SPR include streamlining, clarifications, and updates. New or revised items this year appear in fuchsia in this guide, and key changes are listed below.

Family Data

- Number of newly enrolled families who received the FROG visit in 2022, and removed Parent Survey items.
- Number of families in low-income households.
- Number of primary participants and focus children who receive Tri-Care health insurance is now reported separately from Medicaid and CHIP.

Site Characteristics

- New question about your site's FROG Scale cutoff.
- Additional service area reporting for sites to indicate counties served.
- Cuts include more than 20 items on affiliation date, immunizations, service duration, and measures.

Financial

- New funding source option to note State/Fed Other Specify

Program Policy

- New categories for site enhancements and additional services

Please note: **Staff information is now at the end of the Family Data tab**, and other items have revised language in this guide to assist sites in understanding the item. Please review this guide and your data carefully.

- ★ Family Data is requested for families served in 2022 (fiscal or calendar year). All other tabs request current year (2023) information.
- ★ Some sections are pre-populated with your responses from the previous report to save you time! **Please review** this information carefully, make any changes needed.
- ★ Reminder: when finished, **check the box** at the bottom of each page that says:

CHECK HERE: I have reviewed the information above, and confirm it is accurate to the best of my knowledge ☒



- ★ Click “Save Progress/Submit Data” at the bottom of each page to save your data frequently. You can make changes to your information after it is submitted until the SPR closes.
- ★ Leave items blank if your site does not collect this information and use zero (0) to indicate none.

★ The SPR Dashboard can help you understand your data. It will be available to download no later than Feb 1, 2023

- Download the Dashboard directly from HFAST in the Family Data tab! It contains the Data Checkers for both completion and data quality and the 2023 Dashboard Report.

[Dashboard Tutorial](#)

★ You can view, but not edit, your responses to the previous Site Profile Reports in HFAST. Please note the year in the title refers to the year the information is collected.

- Previous SPRs may no longer be visible in each tab. Download your site's dashboard to see your site's responses.

★ Note that data submitted after 2/28/2023 may not be included in national reports, such as the annual NHVRC Home Visit Yearbook.

Please complete your profile in HFAST by February 28, 2023

Need Help? Email hfast@preventchildabuse.org

*Please include your SiteID (if known) or your state and site name, the web browser you are using, a detailed description of the trouble you are experiencing or question you have, and a phone number in case we wish to reach out for more information.

Thank you for your work in reporting on this very important information!

Site Characteristic Tab

Item in HFAST	Instructions & Response Choices
Use Centralized Intake	<i>Yes or no</i>
When is the assessment (FROG) conducted?	<i>Select one option that best fits most families:</i> Before enrollment After enrollment
For the FROG Scale, are you using HFA's recommended cut-off of 10 or higher?	<i>Sites might use a FROG cutoff score for multiple reasons, like determining eligibility for services or HFA Accelerated, or for other types of reporting. Select one option:</i> Yes No, lower score (specify below) No, higher score (specify below) Not applicable (my site does not use a cutoff score)
★ <i>To help us understand who is eligible for services at your site, select the answer for each item that best fits, even if you have multiple eligibility groups. Provide details or exceptions in the comment box below.</i>	
Eligibility criteria - Select one response per question that best fits your site	<i>For each of the eligibility categories below, pick one of the two options that <u>best fits</u> your site.</i>
Parent Age	Only young parents (such as teens or early 20's) Parents of any age
Number of children	Only first-time parents Any number of children
Income	Only low income, or eligible for WIC, Medicaid, TANF Any income level
Other FROG Cut-off or Eligibility Criteria Specify	<i>(Optional) List other eligibility criteria, exceptions, or other details; or include FROG cut-off score if your site uses a score other than 10</i>
Family Data Collection System	<i>Select one option:</i> Apricot CMEDS EnLite ETO FamilyWise HFMIS (SUNY) Nightingale Notes OCHIDS (Ohio)

	Penelope
	PhDoc
	PIMS
	Visit Tracker
	other (specify in next item)
Other Data Management System Specify:	Specify other data management system only if "other" was selected above, otherwise leave this field blank.
What do you use for HFA accreditation reporting?	Select one option:
	Family Data Collection System only
	HFA Spreadsheets only
	both
Site involved in any formal research or evaluation now or in the past 2 years?	Has your site participated in any research or formal external evaluation in the past 2 years? Please note that this does not include accreditation activities.
	Select Yes or No
If YES, provide email for evaluator	Enter the email address for your main contact person on the evaluation team only if you selected Yes above, otherwise leave this field blank.
Service Area	
Service Area	Select one that best fits your site:
	Single County
	Multi-County
	Single City
	Multi-City
	Neighborhood
	other (select item only if your site serves an area not described above and provide more information in the next item)
Describe other type of Service Area	If you selected "other" in the item above, please describe other service area, otherwise leave this field blank.
In the past 12 months, has your service area expanded or changed? (If so, please update your Service Zip Code list. Remember to notify your TA Specialist before expanding)	Select one option:
	Yes, added new zip codes or counties
	Yes, we serve fewer zip codes or counties than last year
	Not yet, but we plan to expand in the next 12 months
	No, same zip codes or counties as last year
Additional comments on service area changes	If needed, please provide additional comments on service area changes, otherwise leave this field blank.

Add Service Area Counties	<i>In the table, list all of the counties you serve within your state. Click "Add State and County", select your state from the first drop down, click on all counties served to select them in the second dropdown, then click "Update" to save. If your service area extends to another state, click "Add State and County" again to report those counties.</i>						
Comments?	<i>If needed, provide any additional information about counties served.</i>						
Add Service Area Zip Codes	<p><i>Any zip codes that may appear in this list are carried over from previous Site Profiles: please review and add or delete any zip codes to reflect changes in your service area.</i></p> <p><i>Click "Add Service Zip code" and enter a 5-digit zip code, then click "Update". Repeat for additional zip codes. Please note the newly entered zip code will appear at the end of the list, possibly on another page.</i></p> <p><i>*Please update zip codes throughout the year if your site experiences changes to service area.</i></p>						
Community Served	<p><i>Select the categories that best fit your families and estimate the percentage of families served from each type. Enter this as a whole number. Percentages should total 100%.</i></p> <table border="1"> <tr><td>Urban</td></tr> <tr><td>Suburban</td></tr> <tr><td>Rural</td></tr> <tr><td>Tribal</td></tr> </table>	Urban	Suburban	Rural	Tribal		
Urban							
Suburban							
Rural							
Tribal							
Other Community Type	<i>List other community type(s) and percent of families served who live in that community type.</i>						
Caregiver Depression Screen							
Caregiver Depression Screen	<p><i>Check all the maternal depression screens your program uses with families.</i></p> <table border="1"> <tr><td>BDI: Beck Depression Inventory</td></tr> <tr><td>CESD: Center for Epidemiological Studies - Depression Scale</td></tr> <tr><td>EPDS: Edinburgh Postnatal Depression Scale</td></tr> <tr><td>LSP: Life Skills Progression</td></tr> <tr><td>PHQ (any version): Patient Health Questionnaire (any version)</td></tr> <tr><td>Other Caregiver Depression screen: Fill in name of other depression screen or describe if not listed above, otherwise leave this field blank.</td></tr> </table>	BDI: Beck Depression Inventory	CESD: Center for Epidemiological Studies - Depression Scale	EPDS: Edinburgh Postnatal Depression Scale	LSP: Life Skills Progression	PHQ (any version): Patient Health Questionnaire (any version)	Other Caregiver Depression screen: Fill in name of other depression screen or describe if not listed above, otherwise leave this field blank.
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PHQ (any version): Patient Health Questionnaire (any version)							
Other Caregiver Depression screen: Fill in name of other depression screen or describe if not listed above, otherwise leave this field blank.							
Domestic Violence Screens							
Domestic Violence Screens	<p><i>Check all the domestic violence screening tools your program uses with families.</i></p> <table border="1"> <tr><td>None: we don't screen for DV. Select this choice if you do not screen for domestic violence</td></tr> <tr><td>Abuse Within Intimate Relationships</td></tr> <tr><td>Abusive Behavior Inventory</td></tr> <tr><td>DOVE Abuse Assessment Screen</td></tr> </table>	None: we don't screen for DV. Select this choice if you do not screen for domestic violence	Abuse Within Intimate Relationships	Abusive Behavior Inventory	DOVE Abuse Assessment Screen		
None: we don't screen for DV. Select this choice if you do not screen for domestic violence							
Abuse Within Intimate Relationships							
Abusive Behavior Inventory							
DOVE Abuse Assessment Screen							

	HARK/HARK C: <i>Humiliation, Afraid, Rape, Kick</i>
	HITS: <i>Hurt, Insult, Threaten, Scream</i>
	Partner Violence Screen
	RAT/WEB: <i>Relationship Assessment Tool (RAT) or the Women's' Experience of Battering (WEB) developed by Futures Without Violence</i>
	Universal Education (e.g., CUES)
	Other Domestic Violence screen: <i>Fill in name of domestic violence screen if not listed above, otherwise leave this field blank.</i>
Other Assessment Tools (HFA Optional Tools)	
Other Assessment Tools	<p><i>Check all other assessment tools your site utilizes that are not required by HFA's Best Practice Standards.</i></p> <p>None: <i>we don't use any other tools. Select this choice if you do not use any other ongoing assessment tools.</i></p> <p>AAPI: <i>Adult Adolescent Parenting Inventory</i></p> <p>ACEs: <i>Adverse Childhood Experiences Questionnaire</i></p> <p>AUDIT: <i>Alcohol Use Disorders Identification Test</i></p> <p>CLS: <i>Casey Life Skills</i></p> <p>CPS Case: <i>Select if you track substantiated child maltreatment</i></p> <p>CPS Report: <i>Select if you track Reported child maltreatment</i></p> <p>DAST: <i>Drug & Alcohol Screening Test</i></p> <p>HFPI: <i>Healthy Families Parenting Inventory</i></p> <p>HOME: <i>Home Observation for Measurement of Environment</i></p> <p>ISEL: <i>Interpersonal Support Evaluation List</i></p> <p>Kotelchuck Index: <i>Kotelchuck's Adequacy of Prenatal Care Utilization</i></p> <p>LSP: <i>Life Skills Progression</i></p> <p>PFS: <i>Protective Factors Scale</i></p> <p>UNCOPE: <i>Substance abuse screening</i></p> <p>Other Ongoing Assessment Tool: <i>List other ongoing assessment tool(s) your program uses if not listed above, otherwise leave this field blank.</i></p>
<p>★ Don't forget the Confirmation checkbox after you have entered and reviewed the information on this tab! Then, click the Save Progress/Submit Data button!</p>	

Family Data Tab

Item in HFAST	Instructions & Response Choices
All information below is for:	<i>Please take note of the example time frames:</i> calendar year (January 1, 2022 to December 31, 2022) federal fiscal year (October 1, 2021 to September 30, 2022) state fiscal year (mid-2021 to mid-2022, dates vary by state) other fiscal year
For 2022 (fiscal or calendar)	<i>ALL items in Family Data refer to families served in 2022</i>
Number of home visits completed in 2022	<i>Count the total number of home visits completed in 2022 for all families served during that year.</i>
Of the home visits above, how many were conducted virtually?	<i>Total number of virtual completed.</i>
How many families in 2022:	
Received at least 1 home visit (in-person or virtual)	<i>Enter number of families who received 1 or more home visits in 2022, regardless of when they first enrolled or if the visit was in-person or virtual.</i>
<p>★ Sites who provided home visits to fewer than 10 families in 2022 can skip to the end of Family Data to report on your site's Language Capacity (the table within the Primary Participant Language section) and provide information regarding staff in the Direct Service Staff Numbers section. Be sure check the Confirm checkbox at the end of this form and submit. Don't forget to complete the other 3 tabs of this report: Site Characteristics, Financial, and Program Policy.</p> <p>★ Sites who provided home visits to 10 or more families in 2022, please complete the remaining Family Data items.</p>	
Received at least 1 virtual home visit	<i>Enter number of families who received 1 or more home visits by phone or video call in 2022, regardless of when they first enrolled.</i>
Reported as served by MIECHV funds	<i>Enter number of families reported to HRSA as served by MIECHV funds.</i>
Received first home visit in 2022	<i>Enter number of newly enrolled families who received their 1st home visit in 2022. How many of the families who received at least 1 HV received their first home visit in 2022?</i>
<p>★ The following five items are looking for characteristics of the newly enrolled families reported above (who received their first home visit in 2022).</p>	
Received 1st home visit prenatally	<i>Enter number of newly enrolled families (families who received their first HV in 2022) who received their 1st home visit prenatally.</i>

Received 1st home visit prenatally before 31 weeks gestation	<i>Enter number of newly enrolled families (families who received their first HV in 2022) who received their 1st home visit prior to 31 weeks gestation.</i>
How many received a FROG visit?	<i>Enter the number of families who received a FROG visit in 2022.</i>
Enrolled in the past year as HFA Accelerated	<i>Enter number of newly enrolled families who received their 1st home visit in 2022 under HFA Accelerated.</i>
Enrolled in the past year and referred from Child Welfare Agency	<i>Enter number of newly enrolled families who received their 1st home visit in 2022 and were referred from Child Welfare Agency.</i>
★ <i>The remaining items in Family Data are looking for characteristics for all families who received at least one home visit in 2022.</i>	
With a father or partner involved in home visiting	<i>Enter number of families with a father or partner who has attended more than 1 home visit in 2022.</i>
Number of children served in 2022 as the Focus Child	<i>Enter number of focus children. Sites may use their own definition of "focus child". For example, a site may or may not count a prenatal child as a focus child.</i>
Number of additional children served	<i>Enter number of children (such as older or younger siblings) if served in any way (does not need to be formally defined services) who were not counted as a Focus child above.</i>
How many 2022 primary participants were:	<i>ALL items in this section count only the enrolled primary participant for any family who received at least 1 home visit in 2022</i>
Women (cisgender or transgender)	<i>* It is preferred that sites report on only one PRIMARY caregiver/participant per family, even if more than one is participating.</i>
Men (cisgender or transgender)	
Non-binary/gender expansive	
Preferred not to report/unknown gender	
First time parent	<i>Enter number of primary participants who are 1st time parents.</i>
Grandparent of focus child	<i>Enter number of primary participants who are the grandparent of focus child.</i>
Bachelor's Degree or Higher	<i>Enter number of primary participants who achieved a bachelor's degree or higher before enrolling in HFA.</i>
Associate's Degree	<i>Enter number of primary participants who achieved an associate's degree before enrolling in HFA.</i>
Technical Training or Certification	<i>Enter number of primary participants who achieved technical training or certification before enrolling in HFA.</i>
Some College/Training	<i>Enter number of primary participants who attended some college/training before enrolling in HFA.</i>

HS graduate/GED at enrollment	<i>Enter number of primary participants who graduated high school or completed GED before enrolling in HFA.</i>
Less than HS Graduate/GED at enrollment	<i>Enter number of primary participants who had not graduated high school or completed GED before enrolling in HFA.</i>
Education Unknown	<i>Enter number of primary participants whose highest education level is unknown.</i>
Developmentally delayed	<i>Enter number of primary participants who are developmentally delayed. Please consider developmental delay as any parent whose learning needs are permanently challenged and therefore warrant extra time from service providers, special consideration of materials, and resources used. This may be based on diagnosis or observation.</i>
Medicaid Eligible	<i>Enter number of primary participants who are eligible for Medicaid.</i>
Low-income households	<i>Enter number of families in low-income households. HFA's preferred definition of "low-income households" is an annual household income at or below 200% of Federal Poverty Guidelines (FPG). Alternatively, sites can use their own definition of "low-income households" for this item.</i>
Military personnel or spouse	<i>Enter number of families with a member who is or has served in the Armed Forces.</i>
History of substance use disorder	<i>Enter number of primary participants with history of substance use disorder (whether currently using or not; estimate is acceptable). This may be based on diagnosis, screening/assessment, parent report, or observation.</i>
In need of treatment for substance use disorder	<i>Enter number of primary participants who were in need of treatment for substance use disorder in 2022 (estimate is acceptable). This may be based on diagnosis, screening/assessment, parent report, or observation.</i>
Abused or neglected as a child	<i>Enter number of primary participants who experienced abuse or neglect as a child (whether reported to CPS or not).</i>
Involved in Child Welfare System (as caregiver)	<i>Enter number of primary participants with history or current involvement in Child Welfare (like Child Protective Services) as a caregiver.</i>
Single Parent	<i>Enter number of primary participants whose marital status is single, divorced, or widowed at time of enrollment.</i>
Over cutoff on depression screen (any assessment in 2022)	<i>Enter the number of primary participants with an elevated depression score. If multiple screens were given in 2022, the preferred definition is to count participants with elevated screen at any point in 2022. If this is not feasible, report number with elevated screen at a single screening point. The intent is to document how many HFA participants experience elevated symptoms of depression in a given year.</i>
Insurance Status (when last assessed in 2022)	
Of those served in 2022, enter number in each group:	Number of Primary Participants with:
	no insurance

	Medicaid or CHIP Tri-Care Private or other insurance insurance unknown
Of those served in 2022, enter number in each group:	Number of Target Children with: no insurance Medicaid or CHIP Tri-Care Private or other insurance insurance unknown
Housing Status (when last assessed in 2022)	
Housing Status (when last assessed in 2022)	Own/share ownership of their home Rent/share rent of their home Live in public housing Live with parent or family member Other arrangement (not homeless) Homeless - sharing housing Homeless - emergency or transitional shelter Homeless - other arrangement Unknown/Did not report
Caregiver employment status (when last assessed in 2022)	
Of primary participants in 2022, how many were:	employed full time employed part time not employed (whether seeking work or not) unknown employment situation
Focus children: How many in each age group (as of last home visit received in 2022)	
Focus children: How many in each age group (as of last home visit received in 2022)	<i>If ages can't be calculated to last HV, please use other available data on child's age during 2022.</i> Prenatal 0-5 months 6-11 months 12-23 months 24-35 months 36-47 months 48-59 months 60-71 months

	72-83 months	
	Age Unknown	
Focus Child Issues: Number of children who were:		
Child Issues: Number of children who were:	Born at low birth weight, <i>less than 2500 grams or 5lbs 8oz</i>	
	Born premature, <i>born before 37 weeks completed</i>	
	Developmentally delayed or disabled (known or suspected)	
	Medicaid eligible	
Primary Participant Age at Enrollment:		
Primary Participant Age at Enrollment:	<i>Site should enter 0 if there are none in a category</i>	
	Less than 18	
	18-19 years	
	20-21 years	
	22-24 years	
	25-29 years	
	30-34 years	
	35-44 years	
	45-54 years	
	55-64 years	
	65 or more	
	Age Unknown	
Race/Ethnicity: Number of Primary Participants who are:		
Race/Ethnicity: Number of Primary Participants who identify as: <div style="border: 1px solid black; border-radius: 10px; background-color: #ff0066; color: white; padding: 5px; text-align: center; margin-top: 10px;"> More Information on Race/Ethnicity </div>	<i>Site should enter 0 if there are none in a category and leave the category blank if that category is not yet tracked.</i>	
	American Indian/Alaskan Native	
	Asian	
	Black/African American	
	Latino/Hispanic	
	Middle Eastern/North African	
	Multi-race/ethnicity	
	Native Hawaiian/Pacific Islander	
	White (non-Hispanic)	
	Other race/ethnicity	
	Unknown race/ethnicity	
	Other race/ethnicity specify: list other race/ethnicity if you reported participants in the Other race/ethnicity category, otherwise leave this item blank	

Primary Participant Language	
Primary Participant Language	<p><i>Enter the number of primary participants in each category</i></p> <p>Primary Language English</p> <p>Primary Language Spanish</p> <p>Primary Language not English nor Spanish</p>
Site Language Capacity	<p>Select all primary (or fluent) languages(s) for families and/or staff at your site in the last 12 months: Click Add Language then select a language from the language drop-down menu that either staff or families speak. Check the boxes to indicate who speaks that language and choose the appropriate materials options from the drop down. Click update. Your entry will be saved to the end of the list, so you may have to navigate to the last page of the table to see it!</p> <p>Families Speak: select yes or no to indicate if any families you serve speak this as a primary language</p> <p>Staff Speak: select yes or no to indicate if any staff can speak this language.</p> <p>Interpreter used: select yes or no to indicate if an interpreter is used with families who speak this language</p> <p>Materials in this language: Select one to indicate what materials you have available for families who speak this language</p> <p>Yes, all</p> <p>Some (consents, handouts)</p> <p>Consents only</p> <p>No</p>
Comment on languages for our site/families:	If needed, please provide any further information on language, otherwise leave this field blank.
Direct Service Staff Numbers	
How many PEOPLE in direct service roles at end of last year?	<i>Note: Direct service staff are those who engage and enroll families using the FROG Scale(or Parent Survey), and/or carry a caseload of enrolled families & provide HFA home visits.(For supervisors who carry a caseload, count only those that provide at least 2 home visits per week).</i>
What was your total FTEs in direct service roles at the end of last year?	<i>Add the direct service FTEs for all staff listed above.</i>

How many direct service FTEs were open (not staffed) at the end of last year?	Add the FTE for un-filled positions for direct service staff.											
Race/Ethnicity: Number of Direct Service Staff who identify as:	<p>Enter the number of Direct Service Staff in each category. Sites should enter 0 if there are none in a category and leave the category blank if that category is not yet tracked. The sum of these race/ethnicity categories should equal the number of people who provided direct service.</p> <table border="1"> <tr><td>American Indian/Alaskan Native</td></tr> <tr><td>Asian</td></tr> <tr><td>Black/African American</td></tr> <tr><td>Latino/Hispanic</td></tr> <tr><td>Middle Eastern/North African</td></tr> <tr><td>Multi-race/ethnicity</td></tr> <tr><td>Native Hawaiian/Pacific Islander</td></tr> <tr><td>White (non-Hispanic)</td></tr> <tr><td>Other race/ethnicity</td></tr> <tr><td>Preferred not to report/Unknown race/ethnicity</td></tr> <tr><td>Other race/ethnicity specify: list other race/ethnicity if you reported staff in the Other race/ethnicity Category, otherwise leave this item blank .</td></tr> </table>	American Indian/Alaskan Native	Asian	Black/African American	Latino/Hispanic	Middle Eastern/North African	Multi-race/ethnicity	Native Hawaiian/Pacific Islander	White (non-Hispanic)	Other race/ethnicity	Preferred not to report/Unknown race/ethnicity	Other race/ethnicity specify: list other race/ethnicity if you reported staff in the Other race/ethnicity Category, otherwise leave this item blank .
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Other race/ethnicity												
Preferred not to report/Unknown race/ethnicity												
Other race/ethnicity specify: list other race/ethnicity if you reported staff in the Other race/ethnicity Category, otherwise leave this item blank .												
Gender: Number of Direct Service Staff who identify as:	<p>Enter the number of Direct Service Staff in each category. Sites should enter 0 if there are none in a category. The sum of these gender categories should equal the number of people who provided direct service.</p> <table border="1"> <tr><td>Women (cisgender or transgender)</td></tr> <tr><td>Men (cisgender or transgender)</td></tr> <tr><td>Non-binary/gender expansive</td></tr> <tr><td>Preferred not to report/Unknown</td></tr> </table>	Women (cisgender or transgender)	Men (cisgender or transgender)	Non-binary/gender expansive	Preferred not to report/Unknown							
Women (cisgender or transgender)												
Men (cisgender or transgender)												
Non-binary/gender expansive												
Preferred not to report/Unknown												
HFA comments	This field will only be used to indicate if the National Office makes any changes to your Site Profile Report data.											
Comments	This field is to allow you to provide any further information or commentary regarding your site's data. Please note: any questions needing immediate response should be directed to Jennifer Baxter (see contact information in General Instructions above).											
<p>★ Don't forget the Confirmation checkbox after you have entered and reviewed the information on this tab! Then, click the Save Progress/Submit Data button!</p>												

Financial Tab

Item in HFAST	Instructions & Response Choices
Fiscal Year Type	<i>Please take note of the example dates:</i> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">calendar year (January 1, 2023 to December 31, 2023)</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">federal fiscal year (October 1, 2022 to September 30, 2023)</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">state fiscal year (mid-2022 to mid-2023, dates vary by state)</div> <div style="border: 1px solid #ccc; padding: 2px;">Other</div>
Fiscal Year Other Type	<i>Fill in dates used only if "other" is selected above.</i>
Previous Year Program Budget (2022)	<i>Enter total site budget in whole dollars (no decimals) for 2022</i> <i>*ONLY INCLUDE HFA SERVICES, not host agency</i>
Current Year Program Budget (2023)	<i>Same as above for 2023</i>
What proportion of your overall current budget comes from the following:	
Enter percent for each type of funding received; the total for all entries should not exceed 100%.	<i>Only include funding from State System that is not included in other categories below, for example, if you receive MIECHV funds from your state system, including these funds only under the MIECHV category.</i> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">Local Government</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State Children's Trust Fund</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State Dept of Child/Family Services</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State Dept. of Education</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State Dept of Human Services</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State Dept. of Public Health</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State General Revenue</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State System</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">State Other: <i>Include state funding sources not listed above</i></div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">Federal TANF</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">Federal Other: <i>Include federal funding sources not listed above</i></div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">TANF Maintenance</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">CAPTA</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">CBCAP</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px;">CCDBG</div> <div style="border: 1px solid #ccc; padding: 2px; margin-bottom: 2px; color: #c00000;"><i>State/Fed Other Specify: indicate funding if State Other or Federal Other was selected above.</i></div> <div style="border: 1px solid #ccc; padding: 2px;">Corporations</div>

	Earned Income
	Family First Prevention Services Act
	Foundations
	IDEA
	Medicaid
	MIECHV
	Private Donations
	Title IV-B
	Title IV-E
	Title V
	Title XX
	United Way
	Unknown: <i>For use if site does not know specific source of funding</i>
	Other Funding: <i>Include other funding sources not listed above</i>
	Other Funding (specify source) : <i>Specify other funding sources</i>
Have MIECHV Funding? If yes, complete next 2 items	Select Yes or No
Current Year MIECHV Funding (2023)	Enter amount of funding received from MIECHV in 2023. Required unless "no" is selected above.
Previous Year MIECHV Funding (2022)	Enter amount of funding received from MIECHV in 2022. Required unless "no" is selected above.
★ Don't forget the Confirmation checkbox after you have entered and reviewed the information on this tab! Then, click the Save Progress/Submit Data button!	

Program Policies Tab

Item in HFAST	Instructions & Response Choices
What is your major source of parenting materials and child development activities?	
Primary Parenting Materials (Select one)	BabyTalk Growing Great Kids/ Growing Great Families Just In Time Near @ Home Nurturing Program Parents as Teachers Partners for Healthy Baby PIPE None Other (<i>specify below</i>)
Specify Other Primary Parenting Materials	Enter ONLY if you chose "Other" in above question
Additional Parenting Materials (check all that apply):	None 24/7 Dad BabyTalk GGK/GGF: Growing Great Kids/ Growing Great Families Just In Time Near @ Home MOM Project Nurturing Program Partners for Healthy Baby (FSU) PIPE PAT: Parents as Teachers
Additional Parenting Materials 1	Specify <i>additional parenting materials</i> you use that is not on the list above
Additional Parenting Materials 2	Specify <i>additional parenting materials</i> you use that is not on the list above
Additional Parenting Materials 3	Specify <i>additional parenting materials</i> you use that is not on the list above
What is your major source of parenting materials and child development activities?	
Additional services / Enhancements offered by your site (Check all that apply)	Pregnancy/Health: Doula Lactation consultant/CLC Nurse consultation

Infant massage classes
Nutrition/fitness strategy for parents or children
Car seat installation or checks
Other pregnancy/health services (specify):
<i>Groups</i>
Family social
Parent group
Alumni group
Other group (specify):
Father group
Father engagement specialist
Other father engagement strategies (specify):
<i>Economic Well-Being Supports</i>
Basic needs (diapers, formula, food, clothing closets, etc.)
Cash assistance (financial support for housing, utilities, groceries, one-time cash transfers, etc)
Employment readiness
Financial education (EX: budgeting, finances)
Legal assistance/education
Gifts (EX: children's books, Brain Boxes, Bedtime Boxes, Safe Sleep Boxes, etc)
Incentives (gift cards, etc. for participation)
Other economic supports (specify)
<i>Depression and Mental Health</i>
IPV universal education (e.g., CUES)
Mental Health Specialist/Therapist
Moving Beyond Depression
Tandon Mothers & Babies Program
Other Depression Services (specify)

★ Don't forget the Confirmation checkbox after you have entered and reviewed the information on this tab! Then, click the Save Progress/Submit Data button!

Data Usage Policy

Item in HFAST	Instructions & Response Choices
★ <i>Data Usage Policy responses were carried forward from last year. If you completed all 3 items last year, no further action is needed.</i>	
HFA Affiliate Data Usage Policy	<i>Click the link to open the HFA Affiliate Data Usage Policy. You won't be able to sign the acknowledgement in HFAST until you have clicked on the link!</i>
I am authorized to acknowledge this policy for my site	<i>Check this box. If you are not authorized to complete the Data Usage Policy Acknowledgement, have the authorized person log in to complete it.</i>
I have reviewed and understand HFA's Data Usage Policy on behalf of my site	<i>Check this box.</i>
Type your name here to sign	<i>Type in your name. If you cannot type in the box, be sure to click the HFA Affiliate Data Usage Policy link first.</i>

Thank You!