

## Site Definitions

### Site Definition Form

From the Site Definition Form, you will set some basic parameters, plus navigate to six other schedules.

- **Service Start** and **Service End** definitions specify the participant’s enrollment date and termination dates. For Healthy Families accreditation, you must specify “date of first home visit” as service start, and “date of final home visit” as service end. You may use other definitions if you need to run reports for other funders who want to look at other windows of program services (e.g., from date of assessment to date of termination of services).
- **Enrollment Eligibility** lets you specify which people are eligible for services. This impacts whether you will have an option to add an intake record for each person, and also determines the options available in the **Participant Search Menu**. See table below.
- **Home Visit Tracking**. Some sites choose to enter all home visit records for participants into PIMS; other sites choose to enter only Monthly Contact Logs. If your site chooses the latter, then check this button so that PIMS can calculate the number of completed home visits from the Monthly Contact Logs.

Enrollment Eligibility Option	Participant Search Menu Options	Prerequisites to Adding an Intake Record
Offer home visiting services based on a positive screen and assessment	Add New Person at Screening Add New Person at Assessment	Complete an Assessment Record
Offer home visiting services based on a positive screen	Add New Person at Screening Add New Person at Assessment	Complete an Assessment Record
Offer home visiting services universally	Add New Person at Screening Add New Person at Assessment Add New Person at Intake	None

## Service Levels

### Service Level Definition

Current Site ID: IL000

Site/Enrollment	Service Level	Groups	
Immunizations	Well Baby	Outcome Instr	

  

Site ID	Name of Service Level	# visits scheduled per month	Case weight assigned to level	Creative Outreach	Prenatal	Other Program	Temporary Termination
IL000	Level P-1	2.00	2.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level I	4.00	2.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level II	2.00	1.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level III	1.00	0.50	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level IV	0.33	0.25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level X	0.00	0.50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level 1-SS	4.00	3.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level UE	2.00	2.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IL000	Level TT	0.00	0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
* IL000				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Entry Created: 9/10/2013 5:17:20 PM      Last Updated: 9/10/2013 5:17:20 PM  
 by: \*      by:

Save
Undo
Print
Close

Use the Service Level Form to define each level of service your site will use. For each level of service, specify the name, the number of home visits expected each month, and its case weight. Using the check boxes, indicate which levels represent creative outreach, prenatal service level, temporary termination, or other special program levels. Consult with your state level support or HFA Regional Support for more information on defining levels of service.

## Participant Groups Form

Group Name	Group Created	Created By	# of Members	
Teen Moms	7/25/2013	*	5	Select Members
Funder ABC	7/25/2013	*	1	Select Members
Cook County	7/25/2013	*	2	Select Members
Grandparent Participants	7/25/2013	*	0	Select Members
Second Enrollments	9/10/2013	*	0	Select Members
Parents of Multiples	9/10/2013	*	0	Select Members
*	9/10/2013			Select Members

The **Participant Groups** form allows you to define your own groups of people in your database. These groups can be used to include or exclude people from certain reports in your database. For example, you may want to create a group representing a county, or another group representing teen mothers. This form displays the following information:

- **Group Name** can be anything the user chooses
- **Group Created** is the date on which each group was originally created
- **Created By** is the user who was logged in when each group was originally created
- **# of Members** is automatically calculated as the number of people selected for inclusion in each group

To add a new group, simply type in the group name next to the black arrow. For information on how to add and remove people to a group, see **Managing Groups**.

## Ethnic Categories Form

In addition to the standard ethnic/racial subcategories drawn from the U.S. Census, PIMS allows sites to specify up to 26 additional ethnic subcategories. Sites may want to use these to help them collect demographic data on cultural groups particular to their communities. The Ethnic Subcategories Form is preloaded with categories “Other A” through “Other Z”, as shown below.

Ethnic Subcategories				Site ID
Site/Enrollment	Service Level	Groups	Ethnic Categories	
Immunizations	Well Baby	Outcome Instr		
Ethnic Subcategory				
▶	Other A			
	Other B			
	Other C			
	Other D			
	Other E			
	Other F			
	Other G			
	Other H			
	Other I			
	Other J			
	Other K			

To customize this list for your site, simply highlight and type over the generic category title. In the example below, the site specifies additional Hispanic subcategories that are common in their community.

### Ethnic Subcategories Site ID

Site/Enrollment	Service Level	Groups	Ethnic Categories
Immunizations	Well Baby	Outcome Instr	

  

#### Ethnic Subcategory

<input type="text" value="Colombian"/>
<input type="text" value="Honduran"/>
<input type="text" value="Ecuadorian"/>
<input type="text" value="Guatemalan"/>
<input type="text" value="Dominican"/>
<input type="text" value="Peruvian"/>
<input type="text" value="Other G"/>
<input type="text" value="Other H"/>

The new categories are now available in the drop-down menus for ethnicity in the Home, Birth Information, and Partner Demographics forms.

### Participant's Static Characteristics

Date of Birth:	<input type="text" value="3/30/1982"/>
Gender:	<input type="text" value="F"/>
Ethnicity:	<input type="text" value="Hispanic"/>
Race Category:	<input type="text" value="White"/>
Race/Ethnic Subcategory:	<input type="text" value="Mexican"/>
Language:	<input type="text" value="Vietnamese"/>
Religion:	<input type="text" value="Colombian"/>

  

#### Case Notes

<input type="text" value="Honduran"/>
<input type="text" value="Ecuadorian"/>
<input type="text" value="Guatemalan"/>
<input type="text" value="Dominican"/>
<input type="text" value="Peruvian"/>
<input type="text" value="Other G"/>

## Immunization Schedule Form

D:\Program Files\pims7\TRAINING2006-22-12-48.mdb - [Immuniza

File Edit Insert Records Window Help

**Immunization Schedule Form** Site ID: IL000

Immunization Name	Scheduled Immunization Age (in Months)		Required for Children Born After:	Is Reported:
	Earliest	Latest		
Hep B #1	0	0	1/1/1990	<input checked="" type="checkbox"/>
DTaP #1	2	3	1/1/1990	<input checked="" type="checkbox"/>
Polio #1	2	3	1/1/1990	<input checked="" type="checkbox"/>
Hib #1	2	3	1/1/1990	<input checked="" type="checkbox"/>
Hep B #2	4	3	1/1/1990	<input checked="" type="checkbox"/>
DTaP #2	4	5	1/1/1990	<input checked="" type="checkbox"/>
Polio #2	4	5	1/1/1990	<input checked="" type="checkbox"/>
Hib #2	4	5	1/1/1990	<input checked="" type="checkbox"/>
DTaP #3	6	7	1/1/1990	<input checked="" type="checkbox"/>
Hib #3	6	7	1/1/1990	<input checked="" type="checkbox"/>
Hep B #3	6	19	1/1/1990	<input checked="" type="checkbox"/>
Polio #3	6	20	1/1/1990	<input checked="" type="checkbox"/>
Hib #4	12	16	1/1/1990	<input checked="" type="checkbox"/>
MMR #1	12	16	1/1/1990	<input checked="" type="checkbox"/>
DTaP #4	15	19	1/1/1990	<input checked="" type="checkbox"/>
Varicella #1	12	16	1/1/1990	<input checked="" type="checkbox"/>
MMR #2	48	74	1/1/1990	<input checked="" type="checkbox"/>
DTaP #5	48	74	1/1/1990	<input checked="" type="checkbox"/>
Polio #4	48	74	1/1/1990	<input checked="" type="checkbox"/>
PCV #1	2	3	7/1/2001	<input checked="" type="checkbox"/>
PCV #2	4	5	7/1/2001	<input checked="" type="checkbox"/>
PCV #3	6	7	7/1/2001	<input checked="" type="checkbox"/>
PCV #4	12	16	7/1/2001	<input checked="" type="checkbox"/>

The Immunization Schedule form preloads a list of immunizations. It is up to the site to determine if the preloaded schedule of administration timeframes is appropriate. It is recommended that you consult with your health department or pediatric clinics to determine the usual window of administration, based on CDC and AAP guidelines. From this schedule, PIMS will calculate an immunization schedule for each child who has a birth record entered, based on the date of birth.

The box **Is Reported** is checked by default, as HFA credentialing requires that all immunizations appear in reports submitted for accreditation. However, if you have another funder who wants you to look at a limited set of immunizations or you want to compare your immunization completions with CDC standards, you can uncheck one or more boxes. PIMS Immunization reports will only display immunizations where this box is checked.

The **Required for Children Born After** field restricts an immunization requirement to certain children. Note that the individual immunization events in the child's tickler will not be deleted, only hidden. So, if you change your mind and undo this restriction, no immunization data will be lost.

### Well Baby Schedule Form

Site ID: 

Site/Enrollment	Service Level	Groups	Ethnic Categories
Immunizations	Well Baby	Outcome Instr	

Well Baby Visit	Scheduled Visit Age (in Weeks)	
	Earliest	Latest
1	<input style="width: 30px;" type="text" value="0"/>	<input style="width: 30px;" type="text" value="4"/>
2	<input style="width: 30px;" type="text" value="0"/>	<input style="width: 30px;" type="text" value="8"/>
3	<input style="width: 30px;" type="text" value="7"/>	<input style="width: 30px;" type="text" value="16"/>
4	<input style="width: 30px;" type="text" value="15"/>	<input style="width: 30px;" type="text" value="24"/>
5	<input style="width: 30px;" type="text" value="23"/>	<input style="width: 30px;" type="text" value="36"/>
6	<input style="width: 30px;" type="text" value="35"/>	<input style="width: 30px;" type="text" value="48"/>
7	<input style="width: 30px;" type="text" value="47"/>	<input style="width: 30px;" type="text" value="60"/>
8	<input style="width: 30px;" type="text" value="59"/>	<input style="width: 30px;" type="text" value="72"/>
9	<input style="width: 30px;" type="text" value="71"/>	<input style="width: 30px;" type="text" value="96"/>
10	<input style="width: 30px;" type="text" value="95"/>	<input style="width: 30px;" type="text" value="144"/>
11	<input style="width: 30px;" type="text" value="143"/>	<input style="width: 30px;" type="text" value="192"/>
12	<input style="width: 30px;" type="text" value="191"/>	<input style="width: 30px;" type="text" value="240"/>
13	<input style="width: 30px;" type="text" value="239"/>	<input style="width: 30px;" type="text" value="288"/>
14	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>
15	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>

The Well Baby Schedule form provides space to specify up to 15 well baby visits. It is up to the site to determine the required schedule of visits. It is recommended that you consult with your health department or pediatric clinics to determine the recommended schedule for well

baby visits, based on CDC and AAP guidelines. From this schedule, PIMS will calculate a well baby visit schedule for each child who has a birth record entered, based on the date of birth.

## Outcome Instrument Form

PIMS preloads a set of outcome tools that are commonly used in the HFA network. For information on how to add additional instruments, and how to set the administration schedule and checkpoints, see “Configuring Outcome Tools”.

Outcome Instrument List
Site ID: \_\_\_\_\_

Site/Enrollment	Service Level	Groups	Ethnic Categories
Immunizations	Well Baby	Outcome Instr	

Instrument Name	Target	Baseline
AAPI Form A		
AAPI Form B		
ACOG-DV	participant	enrollment
ASQ	child	birth
ASQ-SE	child	birth
Baseline		
CES-D	participant	birth
Denver Pre-Screening Questionnaire	child	birth
Edinburgh	participant	birth
HFPI	participant	birth
HOME- early childhood	participant	birth
HOME- infant/toddler	participant	birth
Kempe Family Stress Checklist		
KIPS	child	enrollment
Life Skills Progression	participant	enrollment
RAT (Relationship Asmt Tool)	participant	enrollment
SAFETY (MD)	participant	enrollment
Self-Sufficiency, Educational (ND)	participant	enrollment

Add New