The “Evidence” in “Evidence-Based”:
In our programs, we strategically gather data in deliberate and meaningful ways. Documentation at the individual family level is collected on six main areas in the lifespan:

- Maternal and Newborn Health
- Maltreatment, Injury and Emergency Room Visits
- School Readiness and Achievement
- Domestic Violence
- Coordination of Referrals and Resources
- Family Economic Self-Sufficiency

Nebraska Benchmark Plan
The goal of evidence-based home visiting programs across the United States is to create positive change in these areas or “Benchmarks.” The data that N-MIECHV collects directly impacts these areas and in the analysis of that data, we can see how the lives of Nebraska families are impacted on a statewide level. Learn more about how we measure that impact in The Nebraska Benchmark Plan. See also:

- Nebraska Home Visiting Tools
- Benchmark Changing Training Handout
Currently several evidence-based models have been proven to achieve positive outcomes in these areas when implemented with fidelity. (Learn more about the approved models: MIECHV Model Evidence of Effectiveness) Our communities choose the model that is the best fit for them, and their identified priorities. N-MIECHV supports the local implementing agencies to ensure that they are following the model requirements, and using the data to influence decision-making and goal-planning with the families.

**Healthy Families America**

Healthy Families America (HFA) is the evidence based model of home visiting that has been chosen by all of our current program sites. They offer national Accreditation and have proven positive outcomes in: maternal and child health; child development and school readiness; reductions in child maltreatment; reductions in juvenile delinquency, family violence, and crime; positive parenting practices; family economic self-sufficiency and; linkages and referrals.

HFA is a family-centered, strengths-based model that stresses caring interactions between the parent and child are key to positive growth and development. Services for eligible families are available from before baby is even born to help create the best nurturing environment in which healthy, happy babies thrive.

**Data Systems**

N-MIECHV supports and provides technical assistance to all of the local implementing sites in the process of collecting and reporting the data. N-MIECHV invests in a sophisticated data system designed by the University of Kansas: Data Application and Integration Solutions for the Early Years or DAISEY, to analyze the local site data and create reports to ensure that Nebraska-MIECHV programs are indeed moving the needle on positive health outcomes.

**Continuous Quality Improvement**

In evidence-based programs, Continuous Quality Improvement plans at the local implementing agency, community and state levels assure that the data supports programmatic decision-making. N-MIECHV created the N-MIECHV Quality Improvement Manual to help guide the process effectively and provides technical assistance and advanced learning opportunities.

"Do the best you can until you know better. Then when you know better, do better."

– Maya Angelou