

## **LOCAL EVALUATOR CONFIDENTIALITY AGREEMENT**

### **BETWEEN THE SYSTEMS OF CARE NATIONAL AND LOCAL EVALUATION TEAMS**

The Caliber National Evaluation Team will provide raw data to the local evaluators in the nine Systems of Care demonstration sites. These data are:

- Interview transcripts from interviews with stakeholders, project directors, child welfare agency supervisors, and family members
- Transcripts from focus groups with child welfare agency caseworkers and partner agency staff
- Survey data (in either Excel or SPSS) from the Child Welfare Agency and Stakeholder surveys.<sup>1</sup>

This agreement, which is between the national and local evaluation teams in the nine demonstration sites stipulates steps the national and local evaluation teams will take to protect the privacy of the participants and the confidentiality of the data. It also makes clear the appropriate use of the data by the local teams.

### **Respondents' Privacy**

To protect the privacy of the respondents, the national evaluation team will code all interview and focus group transcripts, as well as survey instruments with numbers rather than individual respondents' names. With regard to the interview and focus group transcripts, local evaluators will receive transcripts coded with numbers rather than respondents' names. Audio-tapes will not be made available to the local evaluation teams. With regard to the surveys, local evaluators will receive a response database for their site that will contain survey responses and demographic data. Survey respondents will be assigned a number that will correspond with the data in the response database. Name-code indices will be accessible only to the national evaluation team. They will not be made available to the local evaluators, regardless of the intent of the request. In cases where the surveys are completed by a small number of individuals ( $N < 25$ ), the demographic data will not be included in the response database.

### **Confidentiality of the Data**

The local evaluation teams will be subject to the same confidentiality regulations as the national evaluation team. These are:

The confidentiality of the hard data also will be protected, including interview tapes and transcripts, surveys, and all other instance where data are documented. The following steps will be taken to protect the privacy of the data:

- Interview and focus group transcripts will be filed and locked in a central file cabinet. Only research team members will have access to these data. In the case of response databases, the local team will take precautions to store these data on a private, centralized computer drive that is password protected. Only research team members have access to this drive and, therefore, these data.

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<sup>1</sup> Local evaluators will not receive individual surveys. Survey responses will be entered into a database. The response database will then be forwarded to each local evaluation team.

- Local evaluators will not have access to name-code indices. However, in managing the data, particularly the focus group and interview data, should an individual be identifiable by the nature of their responses, the local team agrees to maintain the privacy of this individual. This means, they will not disclose the individual's responses to anyone outside of the research team, and will not disclose the identity of the respondent even to those on the research team, unless it is deemed necessary (i.e., has an impact on the interpretation of the findings). Situations like this will be brought to the attention of the local team's Principal Investigator, who will be responsible for ensuring the privacy of the identified individual.
- Each member of the local evaluation team will sign a confidentiality agreement that will require them to maintain both the privacy of individual respondents and the confidentiality of all data. These signed agreements will be made available to the national evaluation team, at its request.

**Appropriate Use of the Data**

Appropriate use of these data is as follows:

- Data and related findings (e.g., reports) will be reported in summary form, only. This means the information will be reported in such a manner that it cannot be attributable to specific individuals or even small groups of individuals (e.g., the Systems of Care unit of the local child welfare agency).
- These data will be used to answer the local evaluation research questions, only. They will not, for example, be used by agencies to monitor staff or assess quality control.

**Agreement**

By signing this agreement, I understand and agree to the procedures outlined above. I further understand that failing to abide by these guidelines could jeopardize both the privacy of the individual respondents and the confidentiality of the data.

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Name (Print)

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Organization

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Signature

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Date

## **EMPLOYEE CONFIDENTIALITY STATEMENT SYSTEMS OF CARE EVALUATION**

Pursuant to Title 28 of the Code of Federal Regulations, Part 22, project staff have an obligation to respondents to protect their identities and the information they provide to the Systems of Care evaluation project. The identity of respondents and the related data are to remain confidential. Removal of names or disclosure of identities and related information is strictly forbidden. Contents of interviews, focus groups and surveys are not to be discussed with anyone except project staff, and only as it is necessary to complete the assigned work. Additionally, sensitive interview and survey data should not be discussed anywhere it could be overheard by persons who are not authorized to know this information.

As a member of the site personnel, contractor, or subcontractor staff of the Systems of Care evaluation project, I, \_\_\_\_\_, agree that I will protect the confidentiality of all information identifiable to a private person that is reviewed and/or collected in the conduct of my work for the Systems of Care evaluation project.

I agree that I shall not discuss any identifiable information that I may learn of during the course of my employment as part of the site personnel, contractor, or subcontractor staff with anyone other than project staff members who have a need-to-know this information.

I agree to follow the procedures established by the Systems of Care evaluation project to prevent unauthorized access to information identifiable to a private person.

By signing this statement, I am acknowledging that I understand the rules surrounding the protection of confidential information and, if I am found to be in violation of these provisions, I may be removed from the project, as determined by the project officer and evaluation manager.

Full Legal Name (please print): \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date