

Pilot Test Results

The instruments included in this OMB package have been revised and incorporate the pilot test results.

CLIENT LEVEL SURVEY (CLS)	
Average time to complete CLS = 25 minutes	
Feedback	Changes Made to Instrument
Client does not read well and could not read response cards.	Instructions were added for the administrator of the instrument to read questions aloud for those who request it.

CLIENT FOCUS GROUP INTERVIEW GUIDE	
Average time to complete consent process = 5 minutes Average time to complete the focus group discussion = 60 minutes Average time to complete participant data sheet (following discussion) = 10 minutes	
Feedback	Changes Made to Instrument
Confidentiality: need to make it clear their comments won't get back to the program staff (or CSAT).	Consent form revised to clearly state that only de-identified or aggregate data will be disclosed to those other than the research staff.
Clients did not clearly understand the concept of community when we asked about "drug use in the community."	Revised/added the term neighborhood when necessary.
It would have been helpful to discuss some medical issues.	No changes/addition related to this feedback were made. Because medical issues are not the information being sought in this survey, these questions were not added to the instrument.

ADMINISTRATOR INTERVIEW GUIDE	
Average time to complete consent process = 5 minutes Average time to complete interview = 90 minutes (in both pilots two administrators took part in at least a portion of the interview (e.g., Executive Director and Program Coordinator))	
Feedback	Changes Made to Instrument
Confidentiality: Make it clear it's <i>aggregated</i>	Consent form revised to clearly state that only de-identified

ADMINISTRATOR INTERVIEW GUIDE	
presentation of interview data and that “no identifiers would get back to CSAT.”	or aggregate data will be disclosed to those other than the research staff.
Section III: Program Description, add a Question: ask if the PDs felt the program was doing what it had originally been intended to do, and if they could change or tweak it, what they would do.	The proposed question was not added to the instrument.
Need to re-word questions to capture variability of programs. What does participation look like in your program recognizing the variability for each client?	The question asked as written in the guide provides for a client variability discussion, therefore no revisions were made.
Missing future plans...or what’s on drawing board.	This can be viewed as a sustainability question, and it is addressed in Section V: Probe 1.
Advisory board question could be reframed to ask about an oversight group. “In this project, how does this group function and what do they do for you?”	No changes were made to the guide regarding the reframing of the term “advisory board.” The term “Advisory Board” is in the language of the RFP for the grant program.
Nothing related to the frequency of contact/meeting with collaborators/partners.	We added a question that captures this in the administrative guide and in the partner guide.

DIRECT STAFF INTERVIEW GUIDE	
<p>Average time to complete consent process = 10 minutes Average time to complete interview = 60 minutes</p>	
Feedback	Changes Made to Instrument
Confidentiality: need to make it clear the information won’t get back to PD (or to CSAT).	Consent form revised to clearly state that only de-identified or aggregate data will be disclosed to those other than the research staff.
Section IV Program Description – it seemed like you just wanted to ask “how do you know what you’re doing.” Ask about training opportunities rather than specific split of EBPs and training. Ask about how you implement/practice what you learn.	No changes were made to the guide based on this feedback. The questions as asked address the concern.
It would be nice to ask about what changes we have seen in our clients.	No questions were added to the guide based on this feedback. The client survey (completed at baseline, discharge, and 6-month post-baseline) and client focus group discussion guide capture this information. Inclusion of additional items to the guide would result in increased burden.

PARTNERS INTERVIEW GUIDE	
Average time to complete consent process = 10 minutes Average time to complete interview = 90 minutes	
Feedback	Changes to Instrument
Participants thought the questions were appropriate for the purpose of the interview.	No changes made based on participant feedback.

Proposed Sample and Methods

Target Audience(s)	Estimated Sample Size Per Methodology	Selection Criteria by Data Collection Methods
Administrative Staff Grantee Staff* Community Partners/Collaborators*	<p>Semi-Structured Interviews: 768 Administrative Staff: 96 Grantee Direct Services Staff: 432 Community Partners/Collaborators: 240</p>	<p>Semi-Structured Interviews: <i>Administrative Staff:</i> Individuals from each of the 48 Grantee sites who perform administrative tasks related to the TCE-HIV program (e.g., Project Director, Program Manager, and Executive Director) are eligible to be interviewed. <i>Grantee Staff:</i> Individuals from the 48 Grantee organizations who have direct contact with clients to perform pretreatment/outreach, and/or treatment-related tasks will be eligible to be interviewed (e.g., outreach workers, counselors, and case managers). <i>Community Partners/Collaborators:</i> Grantee community partners/collaborators are those agencies or organizations that provide services and activities related to the TCE-HIV program.</p>
Clients	<p>Focus Groups: 720 (9 respondents from each of the 40 grantees during Year 3 and Year 4)</p>	<p>Focus Groups: <i>In-person Focus Groups (Year 3 and Year 4):</i> The targeted audience for the client focus groups are a selection of the first 120 clients from the 40 treatment Grantee programs who meet specific criteria (i.e., have been administered the GPRA, and have been in substance abuse treatment for at least 14 days and are willing to participate in the focus group).</p>

Proposed Sample and Methods

Target Audience(s)	Estimated Sample Size Per Methodology	Selection Criteria by Data Collection Methods
<p>Clients</p>	<p><u>Surveys:</u> Client Surveys: 2,400 (60 respondents from each of the 40 treatment grantees) Client Survey (Baseline) Client Survey (Discharge) Client Survey (6-month post baseline)</p>	<p><u>Surveys:</u> The targeted universe for the TCE-HIV Multi-Site Evaluation client surveys are clients from the 40 treatment Grantee programs. The first 60 clients at each 40 treatment Grantees who are administered the GPRA Tool and agree to participate will be surveyed.</p>

Template of Site Visit Call Script

All correspondence, including phone calls and e-mails, between TCE-HIV evaluation team members and the project sites must be recorded on the communication log. The following is the suggested script for calling sites to recruit them for visits.

Good (morning/afternoon/ evening), my name is _____ and I am calling on behalf of JBS International and the Center for Substance Abuse Treatment TCE-HIV multi-site evaluation.

May I please speak with Project Director Name _____?

If Project Director is unavailable:

Do you know a better time to reach him/her?

If a time is suggested record it in the communication log.

May I please leave a message/voicemail?

Message left with another person:

This is _____ calling on behalf of JBS and the Center for Substance Abuse Treatment TCE-HIV multi-site evaluation. I am calling to speak with Project Director's name to schedule a visit to Agency Name. If you would please have him/her contact me at phone number, I would appreciate it.

Request the name and title of the person with whom you leave the message. Record his or her name and title in the communication log.

Voicemail:

Hello this is _____ calling on behalf of JBS International, the independent evaluator for the Center for Substance Abuse Treatment TCE-HIV multi-site evaluation. At your earliest convenience, if you would please return my call at _____ to schedule a visit to your program, I would appreciate it. Again this is _____ calling on behalf of JBS International and my number is _____. Thank you and I look forward to speaking with you soon.

Record date and time of voicemail message in the communication log.

If Project Director is available:

(Dr. /Ms. / Mr.) _____, I am calling on behalf of JBS International to schedule a visit to your TCE-HIV program. JBS is an independent evaluator for the TCE-HIV multi-site

Attachment 4: Document 3 - Site Visit Call Script

evaluation conducted on behalf of the Center for Substance Abuse Treatment. Last year, JBS conducted a preliminary visit to your program, and we are planning a second site visit to your agency this year.

Sometime between month and month , three members of the TCE-HIV evaluation team would like to visit your site to meet with you and your staff. The primary purpose of the visit is to learn about any changes in your program implementation over the past year, and for you to provide us with updated information regarding your TCE-HIV program goals and activities.

The visits will take 1–2 days and we would like to speak with you and as many key staff members and collaborators as possible through a series of one-on-one or group interviews. For instance, we'd like to meet with the executive director, the program manager, your TCE-HIV direct services program staff (including outreach workers, treatment counselors, case managers), and representatives from your TCE-HIV program's key partners and collaborators. We are also planning to conduct a focus group with a small group of your current TCE-HIV program clients.

Currently, we have the following dates available to visit your program: _____.

Would the staff members and partners I mentioned be available for a 60–90 minute meeting on one of the days of our site visit?

We would like to confirm these dates as soon as possible in order to accommodate all of the grantees' availability.

Are you able to confirm one of these dates now?

If able to confirm date:

Which date would you like?

Great, we will schedule a team to come to your site on _____ at _____ (e.g., Wednesday, February 10, at 8 a.m.)

Record the details regarding the date and time of the visit on the communication log.

Is there a hotel in the area that you would recommend?

If Yes: Record the hotel name and address on the communication log.

I will send you an e-mail in the next day or two with the confirmed date and contact information of the persons who will be visiting you. My e-mail will also include a draft agenda and additional details on how best to prepare for the meeting. At your convenience, please review the agenda and e-mail any suggested changes to me. I will also send you an e-mail about client recruitment for the focus group we will be conducting during our visit.

Attachment 4: Document 3 - Site Visit Call Script

After getting your feedback about the site visit agenda and scheduling, I will send a final agenda and a copy of the grantee profile that we updated during last year's visit to your program. If possible, please review the grantee profile prior to our visit because we will spend some time during our visit updating the document to reflect any changes that have occurred over the past year.

If you have any additional questions or if you need to change the dates for the visit, please contact me at any time by phone or e-mail. My phone number is _____ and my e-mail address is _____.

Also, I would like to confirm that the number where I reached you is the best contact number. I dialed _____. Is this the best way to reach you? I also wanted to confirm that I have the proper e-mail address for you: _____. Is that correct?

We appreciate the opportunity to visit your site to learn more about your program. Thank you very much for talking with me today. I appreciate it.

If unable to confirm date:

We would like to confirm a time slot and accommodate all of our grantees' schedules, so please let us know your availability as soon as possible. If for some reason none of these dates are suitable, we will work with you and your staff to come up with an alternate date that is more convenient.

How much time do you need to provide me with your availability? Okay, I will follow up with you in # _____ (hours/ days/ weeks) to confirm a date and time for the visit. I just wanted to remind you that we would also like to meet with your TCE-HIV program staff members, the executive director, and representatives from your key partner organizations. So please confirm their availability to meet with us on at least one of the two days of our visit, as well. In the meantime, if you need any additional information, or if you would like to confirm a visit date sooner, you can reach me by phone or e-mail.

My phone number is _____ and my e-mail address is _____.

Also, I would like to verify that the number where we reached you is the best contact number. I dialed _____. Is that the best number to reach you? I also wanted to confirm that we have the proper e-mail address for you _____. Is that correct?

Okay, thank you very much for your time. I look forward to talking with you soon.

TCE-HIV Multi-Site Evaluation Template of Confirmation Letter

Address of site (example below):

La Clinica del Pueblo
2831 15th Street, NW
Washington, DC 20009

Date, 2010

Dear _____: (e.g., name of Project Director, such as Dear Dr. Jones)

This letter is to confirm that we will be visiting your site as part of the TCE-HIV Multi-Site Evaluation Project on Dates, 2010. (e.g., March 11–12, 2010)

The visit will be conducted by members of the TCE-HIV evaluation team, the Center for Substance Abuse Treatment's (CSAT's) contractor for the TCE-HIV evaluation project. An evaluation team member will work with you prior to the visit to ensure that time spent on site is efficient and well organized.

The visit will include interviews with the administrative staff, direct-service staff, and partners/collaborators of your TCE-HIV program. The interviews conducted with key staff at your agency will gather information about successes and challenges of implementing GRANTEE NAME's TCE-HIV program. The goals of the interviews are to better understand how your TCE-HIV program has developed; how it assesses client outcomes; and how agency and community partnerships, linkages, and capacity have developed through the course of your project's operations.

In addition to staff and partner interviews, a focus group with a small number of your TCE-HIV clients will also be conducted to gather information regarding their perspectives about your program. To effectively recruit clients to participate in the focus group, we ask that a designated program staff member act as a point of contact to assist with recruitment of focus group clients.

The remainder of this letter outlines the visit schedule and requested feedback about the proposed agenda. The visit will begin with a welcome and introductions on the morning of DATE, 2010. Immediately following the introductions and a brief overview, TCE-HIV evaluation team members will meet individually with key staff members from your program and from your partners/collaborators, as appropriate.

Attachment A contains a list of key personnel typically associated with the administration of substance abuse and HIV/AIDS service delivery at most agencies. It is essential that we meet with many of these individuals during the site visit, and we would appreciate it if you worked

Attachment 4: Document 4 - Site Visit Confirmation Letter

with our team to develop the meeting schedule. Attachment B is a proposed site visit schedule. Please fill in the names and titles of the staff members we will interview in the time slots of the proposed agenda. Feel free to change the times listed for the client focus group and interview with the project director if other times are more convenient for your program schedule. If there are other individuals at NAME OF SITE you believe would be useful for us to meet, please add them to the agenda in Attachment B.

In general, interviews take approximately 60 to 90 minutes to complete.

Please send Attachment B with the names and titles of key staff via e-mail to me at e-mail address by (day of week), Date , 2010. Please contact me at phone number (e.g., 240-645-1234) with any questions you may have about the upcoming visit or the proposed agenda. We are looking forward to meeting with you and your staff in Month of visit.

Sincerely,

Your name and credentials

Your title

TCE-HIV Evaluation Project

cc: Government Project Officer Name (e.g., Stephen Carrington, MA, CSAT)

Attachments

ATTACHMENT A

TCE-HIV EVALUATION PROJECT VISIT AGENCY STAFF TO BE INTERVIEWED

The following is a list of staff that the members of the Multi-Site Evaluation Team may need to meet with during the CSAT TCE-HIV evaluation project site visit. The actual position title and location of staff will vary depending on the size and structure of the agency. This list is intended as a guide. We may not need to meet with each individual, but staff members in these positions are typical of those who usually provide information. Please use this information as a guide for filling out the table in Attachment B.

1. Executive Director

2. Project or Clinical Director and Other Management Staff
 - Project director
 - Clinical director
 - Other managers

3. Direct Service Staff
 - Outreach workers
 - Counselors
 - Treatment providers
 - Case managers

4. Partners/Collaborators

ATTACHMENT B

**TCE-HIV EVALUATION PROJECT SITE VISIT
NAME OF SITE (e.g. LA CLINICA DEL PUEBLO)
 SCHEDULE**

TIME	<u>Date, 2010</u>	<u>Date, 2010</u>
9:00 – 9:15 a.m.	Welcome and introductions	
9:15 – 9:30 a.m.	Overview and purpose of the visit	
9:30 – 11:00 a.m.	<u>NAME</u> Project Director	<u>NAME</u> Partners/Collaborators
12:00 – 1:00 p.m.	<u>NAME</u> Case manager	
2:00 – 3:00 p.m.	Client focus group	
3:00 – 4:00 p.m.		

Consent Form for Participation in the Targeted Capacity Expansion Program for Substance Abuse Treatment and HIV/AIDS Services Multi-site Evaluation

ADMINISTRATIVE STAFF SEMI-STRUCTURED INTERVIEWS

A. BACKGROUND AND PURPOSE

JBS International, the Alliance for Quality Education, Battelle Memorial Institute, and the Oregon Health & Science University (JBS team) have a contract with the Substance Abuse Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) to conduct a Multi-Site Evaluation of the TCE-HIV program. The JBS team is not part of CSAT or any other federal agency.

The purpose of this study is to learn more about the effect of outreach/pretreatment and substance abuse treatment programs supported by TCE-HIV funding. The goal of the study is to improve outreach/pretreatment and substance abuse treatment for racial and ethnic minorities at risk for HIV/AIDS. Information from your participation will help the JBS team understand how programs can better reduce substance abuse and HIV risk behaviors.

You are being asked to participate in this study because you are an administrator of a TCE-HIV program.

B. PROCEDURES

If you agree to participate, the following will occur:

- You will complete a form providing background information (e.g., age, gender, and years at current staff position).
- You will take part in an interview. The interview will be about your role, activities, and experiences as an administrator of this program.
- The interview will last approximately 90 minutes.
- The interview will take place at a time and place convenient to you.
- The interview discussion will be audio taped to ensure accuracy in reporting your statements.
- Neither your name nor identity will be used in any published reports.

All information you provide is anonymous. Input you provide during the interview will be combined with information from other interviews from across the United States. The combined information will be analyzed. Only combined results will be presented in reports.

C. RISKS

The risks for participating in the study are expected to be minimal. Responding to the questions does not involve great risk, but this activity might be tiring. The JBS team does not have a program to pay you or provide medical care if you are hurt by participating in this research project.

Notice to Respondents

Public reporting time for this collection is estimated to average 90 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to SAMHSA OMB Officer, 1 Choke Cherry Road Room 7-1044, Rockville, MD 20850. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is XXXX-XXXX.

D. PRIVACY

The privacy of the information we collect about you will be very carefully protected. The evaluation staff will be trained on handling sensitive data and the importance of privacy. All of the data will be kept in locked files at JBS International, and only the official project staff will have access to these files. At the end of the project, all data will be given to CSAT. The data that is given to CSAT will not include names or participant identification.

E. BENEFITS

There is no direct benefit to you for participating in this research project. However, the information you share might benefit the TCE-HIV program and similar programs targeting persons who abuse substances and are at risk for HIV-AIDS.

F. RIGHT TO REFUSE OR WITHDRAW

Your participation in this interview is completely voluntary. You may end your participation in the interview at any time. If you refuse to participate, there will be no penalty or loss of benefits to you.

G. PERSONS TO CONTACT

If you have any questions about this study, please contact Dr. Resa Matthew at JBS International.

Resa Matthew, Ph.D.
JBS International
5515 Security Lane, Suite 800
Bethesda, MD 20852
(301) 495-1080
rmatthew@jbsinternational.com

If you have any concerns about your rights in this study or any questions about injuries related to the research project, please contact Dr. Amanda Gmyrek of the JBS International Institutional Review Board.

Amanda Gmyrek, Ph.D.
JBS International
5515 Security Lane, Suite 800
Bethesda, MD 20852
(301) 495-1080
agmyrek@jbsinternational.com

YOUR CONSENT

You have read this consent form. You have been given a chance to ask questions, and you feel that all of your questions have been answered. You know that you are free to participate in the interview or not. You know that after choosing to participate in the interview, you may stop at any time without penalty. You are signing below to indicate that you agree to participate in this interview and give permission for your responses to be audio recorded.

Participant Name (Print)

Date

Participant Signature

Attachment 4: Document 5 - Administrative Staff Consent Form

I acknowledge that I witnessed the participant sign this consent form.

Witness' Name (Print)

Date

Witness' Signature

Researcher Signature

Date