

ATTACHMENT C2: COST STUDY CONSENT FORM AND PREPARATION TABLE

Case Worker and Supervisor Consent Form

Westat and its subcontractors, James Bell Associates, the School of Social Work of the University of North Carolina at Chapel Hill, Andrew Barclay Associates, and Ronna Cook Associates have been contracted by the Office of Planning, Research, and Evaluation (OPRE) of the U.S. Department of Health and Human Services to evaluate the Permanency Innovations Initiative (PII). The focus group in which you will participate is a key part of the PII Cost Evaluation. Focus group participants will define activities to be included in a Weekly Case Work Activity Log and a Weekly Supervision Activity Log. The focus group also will establish an estimate of the person-time (labor) typically required to complete case work and supervision activities. The logs developed by the focus group will be completed by case workers and supervisors involved in **[name of PII Site Project]**.

The focus group meeting will be approximately 4 hours in duration with two 15-minute breaks at which snacks and beverages will be provided. Before the meeting, focus group participants will spend up to 90 minutes reviewing and commenting on a preliminary listing of **[name of PII Site Project]** case work and supervision activities (see the Cost Study Focus Group Preparation Table). After the meeting, focus group participants will spend 90 minutes completing a draft version of a weekly activity log and participate in a debriefing call conducted by the focus group facilitators. Your employer is aware of the time commitment involved and supports your participation in the focus group.

Your participation is voluntary; without risk of penalty, you may discontinue participating or choose not to answer certain questions at any point during the activities. We anticipate minimal risk or harm to you by participating in this focus group. The information collected will benefit the **[name of PII Site Project]** by establishing systematic estimates of case-level operating costs, as well as provide information to the Federal government and other jurisdictions regarding the cost of operating an intervention to reduce long-term foster care. There are no direct benefits to you for participating in the focus group.

Everything you say in the cost study activities will be kept private to the extent allowed by law. However, we will in all cases take necessary action, including reporting to authorities, to prevent harm to you or others. Information gathered will be used to inform the PII Cost Evaluation and will be included in reports provided to the federal government during the duration of the project. Your name will not appear in any reports. The information shared in the focus group meeting and telephone conference calls will only be reported in consolidated form. We ask that all group participants respect the privacy of the sessions and not discuss “who said what” during or after focus group participation is over. However, please be aware that this is the nature of groups and privacy can't be absolutely guaranteed.

The collection of information described in this consent is voluntary. 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 collection is 0970-0408 and it expires **XX/XX/XXXX**.

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If you have any questions pertaining to the PII Cost Study, you may contact James Bell, at bell@jbaassoc.com or XXX-YYY-ZZZZ. If you have any general questions about the overall PII Evaluation, you may contact the associate project director, George Gabel, at georgegabel@westat.com or 1-800-987-8281, x4223. If you have any questions about your rights as a participant in this study, call the Westat Human Subjects Protections office at 1-888-920-7631. Please leave a message with your full name, the name of the research study about which you are calling, and a phone number beginning with the area code. Someone will return your call as soon as possible.

If you agree to participate in the focus group preparation, focus group discussion, and post-focus group trial administration of the activity log, please sign the statement below. You will receive a copy of this form for your records.

Participant Statement:

I agree to participate in the focus group that will include questions about the name, definition, and person-time requirements of **[name of PII Site Project]** case work and supervision activities. I also agree to complete the focus group preparation table and the post-focus group trial administration of the activity log. I understand what my participation in the focus group involves, that I am free to end my participation at any time, and that there will be no penalty for doing so.

Participant Name

____/____/____

Date

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FOCUS GROUP PREPARATION TABLE

Prior to our pre-focus group conference call, please review this preliminary listing of case work and supervision activities. Consider the names, definitions, and amounts of person-time estimated for completing each activity. If you want to suggest a revised name, definition, or time estimate, indicate that in the “notes” column. Please spend up to 90 minutes for this review.

	Activity Name	Definition	Person-Time in Minutes	Notes
Casework Activities	Direct client service case work			
	Advocacy	Advocacy for and with the client	20	
	Assessment	Assessment of client needs and strengths	30	
	Counseling	Provision of direct counseling/support to client	60	
	Transportation	Transportation of client to and from appointments	40	
	Referral	Referral of client to services	10	
	Indirect client service case work			
	Documentation	Completion of clinical documentation	30	
	Consultation	Consultation and collaboration with colleagues about client progress	10	
	Scheduling	Scheduling of services and meetings on behalf of client	20	
Travel	Staff member travel	40		
Supervisory Activities	Individual supervision activities			
	Consultation	Consultation to caseworkers about client needs and progress	20	
	Documentation	Review and approval of case documentation	30	
	Mentoring	Individual mentoring of caseworkers	30	
	Client meeting	Attendance at client/family team meetings	60	
	Group supervision activities			
	Training	Provision of training to teams of caseworkers	120	
	Review documentation	Monthly or quarterly review of team progress reports	90	
	Data entry	Entry of data on caseworkers' referral activities	40	
	Committee work	Attendance at inter-agency committee meetings	120	

Burden Statement: Public reporting burden for this collection of information is estimated to average 90 minutes. This estimate includes the time for reviewing instructions and completing the collection of information. 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 collection is 0970-0408 and it expires XX/XX/XXXX.