

Cost Study of Evidence-Based Teen Pregnancy Prevention Programs

Staff Time Use Survey

Draft

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To help expand the available information on program costs, the Office of Adolescent Health (OAH) within the U.S. Department of Health and Human Services is conducting a cost study of evidence-based approaches to teen pregnancy prevention. OAH has contracted with Mathematica Policy Research, an independent research organization, to design and conduct the study.

As part of the study, we are conducting this survey to learn how staff members in organizations that provide teen pregnancy prevention services spend their time working on the teen pregnancy prevention program. This information will be used to gain a better understanding of the costs of specific teen pregnancy prevention program activities.

Who Should Complete the Survey. All staff members that spend any time delivering or managing and administering the teen pregnancy prevention program should complete this survey, including direct service providers, teachers or educators, supervisors/managers, administrators, or other agency personnel.

How to Complete the Survey. Most questions in Section A can be answered by simply placing a check mark or entering a number in the appropriate box. For some questions you will be asked to write in a brief response. In Section B, you will be asked to enter the number of hours you spent on specific activities in an average or typical week during the past month.

For questions that require a numeric response, you may enter numbers including decimal points, up to one place after the decimal (for example, 1.5).

If you are unsure of how to answer a question, please give the best answer you can rather than leaving it blank.

Voluntary Participation. Your participation in this survey is important and will help us understand the resources needed to offer teen pregnancy prevention programs. You may refuse to answer any question. Information you provide will be secure to the extent permitted by law, and the evaluation will not identify individuals in any of its reports.

Please complete this questionnaire within the next 5 days. It will take approximately 20 minutes to complete. If you have any questions, please contact Heather Zaveri at Mathematica Policy Research at hzaveri@mathematica-mpr.com or (202) 264-3441.

Thank you for your cooperation in completing this questionnaire.

Please answer the following question and then you will begin the survey.

1.	I have read the introduction and agree that the information I provide in this survey may be used for the Cost Study of Evidence-Based Teen Pregnancy Prevention Programs

O	Yes1	
O	No	END SURVEY

SECTION A: YOUR POSITION AND WORKING HOURS

	AGENCY NAME
	NO RESPONSEM
	What is the job title of your current staff position? (If you have more than one job title, plandicate the titles for all positions you currently hold.)
	JOB TITLE
	NO RESPONSEM
	How would you describe your primary responsibilities for the [MODEL] teen pregnancy prevention program?
	SELECT ONE ONLY
	O My primary responsibilities relate to direct service delivery1
	O My primary responsibilities relate to management and administration2
	O My primary responsibilities are divided between direct service delivery and management and administration
	NO RESPONSEM
١	What is your current employment status?
	SELECT ONE ONLY
	O Permanent full-time1
	O Permanent part-time2
	O Temporary full-time3
	O Temporary part-time4
	O On call5
	NO RESPONSEM
ı	How many hours are you scheduled to work at your agency in a typical or average week?
	HOURS PER WEEK
	NO RESPONSE M

A6.	At [TEXTFILL from A1], do you work only for the [MODEL] teen pregnancy prevention program or do you divide your time between the [MODEL] teen pregnancy prevention program and other programs or responsibilities?		
	SELECT ONE ONLY		
	O I work only for the teen pregnancy prevention program		
	 I divide my time between the [MODEL] teen pregnancy prevention program and other programs or responsibilities		
	NO RESPONSE		
	M		
A7.	How many hours per week are you scheduled to work or do you usually work <u>for the [MODEL]</u> teen pregnancy prevention program in a typical or average week?		
	HOURS PER WEEK		
	NO RESPONSEM		
A8.	Sometimes program staff members spend more time working than they are scheduled or paid to work. In a typical or average week in the past month, did you spend more hours working for the [MODEL] teen pregnancy prevention program than you were scheduled or paid to work?		
	O Yes1		
	O No		
	NO RESPONSEM		
А9.	In a typical or average week in the past month, how many more hours did you spend working for the [MODEL] teen pregnancy prevention program than you were scheduled or paid to work? MORE HOURS PER WEEK THAN SCHEDULED OR PAID NO RESPONSE		

SECTION B: TIME ALLOCATION

The table below lists 11 activities commonly performed when working in a teen pregnancy prevention program. The activities are divided into two groups: (1) direct services to youth and (2) management and administration.

Please follow these instructions to respond to questions B2a through B2g.

- 1. Review the activities and definitions listed in the table. (You may need to scroll down to view all activities.)
- 2. Think about how you used your time working on the [MODEL] teen pregnancy prevention program during a *typical or average week in the past month*.
- 3. Enter in the table the number of hours per week you estimate that you spent on each activity.
 - If you did not spend time on an activity during a *typical or average week* in the past month, enter 0. Not all activities are applicable to all staff roles.
 - If you spent time on an activity in some weeks but not others during the past month, please enter your best estimate of the average amount of time spent per week.
- 4. Check that the total number of hours you entered equals the number of hours you spent working for the [MODEL] teen pregnancy prevention program in a *typical or average week*.

		HOURS PER WEEK
B1. T		
	DIRECT SERVICES TO YOUTH	
B2a.	Preparation and Delivery of Core Group-Based Program Content	
	Preparing for and delivering core group-based elements of the program.	
B2b.	Preparation and Delivery of Individualized Activities	
	Preparing for and providing one-on-one activities to youth enrolled in the program. Conducting case management on behalf of the youth, or meeting individually with youth to address concerns.	
B2c.	Provision of Supplemental Services	
	Providing or participating in supplemental program services. Depending on	
	the program, this may include parent education sessions or school assemblies.	
B2d.	Travel/Transportation	
	Traveling to locations to provide services or transporting youth.	
	MANAGEMENT AND ADMINISTRATION ACTIVITIES	
B2e.	Outreach, Recruitment, and Enrollment	
	Communicating with other agencies and people, including potential	
	participants, to inform them about services available through the program. Enrolling youth in the program.	
B2f.	Staff Recruitment	
	Recruiting and hiring program staff.	
B2g.	Providing or Attending Training and Supervision	
	Providing or attending training on topics related to delivery of services or program operations. Providing or receiving feedback and supervision on delivery of services or program operations.	

		HOURS PER WEEK
B2h.	Planning and Collaboration	
	Strategic planning and decision making, participating in committees that support program operations, developing and fostering relationships to support program operations.	
B2i.	Program Data Collection, Analysis and Monitoring	
	Analyzing data to monitor program implementation and assess fidelity to program model. Using data to support program improvement.	
B2j.	General Management and Administration:	
	Budgeting and financial reporting, managing or negotiating contracts, completing paperwork, and management or administrative activities that do not fall into other categories.	
B2k.	Evaluation	
	Planning program evaluation activities, such as those conducted for the local or federal evaluation or as required by other funders; providing or collecting data required for program evaluation; or traveling for evaluation-related purposes.	
B3.	Total Hours Entered (The survey automatically calculates this total.)	
БО.	Total Hours Entered (The survey automationly sursulates this totally	
	next two questions ask about time you spent attending professional training past year. Please think about professional development trainings or workshops you	ı may have attended,
	including initial or refresher training for the [MODEL] teen pregnancy pre during the past year.	vention program,
	Did you attend professional development trainings or workshops <u>during</u>	the past year?
	O Yes	1
	O No	0 GO TO END
	NO RESPONSE	M
B5.	How many hours do you estimate you spent attending initial or refresher [MODEL] teen pregnancy prevention program, during the past year?	training for the
	HOURS SPENT IN INITIAL OR REFRESHER TR YOUR TEEN PREGNANCY PREVENTION PROC THE PAST <u>YEAR</u>	
	NO RESPONSE	M
В6.	How many hours do you estimate you spent attending other types of prodevelopment trainings or workshops during the past year?	fessional
	HOURS SPENT IN PROFESSIONAL DEVELOPM	/FNT
	TRAININGS OR WORKSHOPS DURING THE PA	
	(RANGE 1-99)	
	NO RESPONSE	M

END. You have completed the survey. Thank you.