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**ATTACHMENT 1: MIHOPE TELEPHONE CONTACT WITH STATE
ADMINISTRATORS**

2/22/2012

MIHOPE

EMAIL TEMPLATE

RPO ALERT TO STATE ADMINISTRATORS ABOUT STUDY TEAM

COMMUNICATION

Subject Line: HHS Mother and Infant Home Visiting Program Evaluation

Dear [insert state administrator],

I am writing on behalf of the researchers from the Mother and Infant Home Visiting Program Evaluation (MIHOPE). This team has been contracted by the Administration for Children and Families, Office of Planning Research and Evaluation and the Health Resources and Services Administration to study the new federally funded MIECHV home visiting programs. They are seeking states and local home visiting programs to participate in the evaluation. The team would like to schedule a one-hour telephone call with you to ask about how the state plans to use MIECHV funds and the local programs that will be receiving those funds.

This study is extremely important since OMB and Congress are looking for the highest level of evidence of a program's impact to support on-going federal funding. The study will generate a wealth of data to inform policymakers and practitioners about what difference home visiting programs make, who they help, and why. As you may remember, the MIECHV legislation requires this national evaluation and your state provided assurances about your willingness to participate in the evaluation, if selected. We hope if you are selected you will enthusiastically join the study.

Attached is a brief description of MIHOPE. Please look out for a call from the research team. In the meantime, feel free to contact me if you have any questions.

Thank you,

Project Description

(INSERT MIHOPE LOGO)

Mother and Infant Home Visiting Program Evaluation

Home visiting programs are recognized as an important strategy for providing support services to families with young children. Programs are diverse, widely used across the country, and generally aim to provide information, referrals, and parenting support to reduce child maltreatment, improve maternal and child health, and improve early school readiness. The recent growth in federal funding to support the scale up of evidenced-based programs provides an unprecedented, critical opportunity for program and research collaboration at the Federal, State, and community levels.

The Mother and Infant Home Visiting Program Evaluation (MIHOPE) is sponsored by the U.S. Department of Health and Human Services, Administration for Children and Families and the Health Resources and Services Administration. This evaluation, mandated by the Patient Protection and Affordable Care Act of 2010 (PPACA) (P.L. 111-148), is designed to build knowledge for policymakers and practitioners about the effectiveness of the new federally funded Maternal, Infant and Early Childhood Home-Visiting Program (MIECHV) in improving outcomes for at-risk children and families.

The Study. The study includes: an *analysis of the state needs assessments* that were provided in the state MIECHV applications; an *effectiveness study* that includes an impact analysis to measure what difference home visiting programs make for the at-risk families they serve, focusing on areas like prenatal, maternal, and newborn health, child development, parenting, domestic violence, and referrals and service coordination. The effectiveness study will also include an implementation analysis that will examine how the program models operate in their local and state contexts and describe the families who participate; and an *economic analysis* that will examine the financial costs of operating the programs. A special goal of this study is the linking of implementation strategies to program impacts, thus informing the field about the types of program features or strategies that might lead to even greater impacts on families. For example, understanding how, and at what level, the average family participates in the program will provide context to any variation in impacts we find in the health of families. The primary data used in the study are expected to be collected by the research team through surveys, review of administrative records, interviews, observations, and staff logs.

Selection and Enrollment. Sites in the evaluation will operate one of four models that meet HHS' criteria for evidence-based models and were chosen by at least 10 states for their MIECHV programs: Early Head Start – Home Visiting, Healthy Families America, Nurse Family Partnership, and Parents as Teachers. Approximately 85 local home visiting program sites in 12 states are expected to be selected to participate. Among families who are eligible for the study, a lottery-like process, also known as random assignment, will be used to select which families to enroll in home visiting services. The use of random assignment means that each program will need to have more people eligible for services than can be enrolled into home visiting. The research team will work with each program to build on their existing outreach and assessment processes to help recruit enough families. All families in the lottery will be invited to participate in the evaluation. Those selected for home visiting services will form the program group, and those not selected will form a comparison group. The research team will monitor both groups over time to see if differences emerge in the outcome areas mentioned above. A total of 5,100 families are expected to participate in the study.

Benefits to Participation. Participating in a study like MIHOPE includes the following benefits: (1) Recognition to your state and MIECHV programs distinguishing your practices and demonstrating your commitment to rigorous research on program effectiveness; (2) A strong evidence base to inform public funding of home visiting and national family policies; (3) Information about what difference home visiting programs make, who they make more difference for, and why; (4) Feedback about program and state program participation; and (5) Funds to support staff participation in research activities.

Project Timeline. Study enrollment and data collection will begin in 2012. Data gathered from the initial information provided by families and staff will be published in a report to Congress in 2015. There are plans for follow up through 2018.

The Study Team. The study will be conducted by a team of organizations: MDRC (the lead), James Bell Associates, Johns Hopkins University, and Mathematica Policy Research. For more information please contact: Sharon.rowser@mdrc.org or Lauren.supplee@acf.hhs.gov.

(INSERT LOGO)

MIHOPE Frequently Asked Questions

Results of the Mother and Infant Home Visiting Program Evaluation (MIHOPE) will provide important input into the national debate about policies and practices designed to improve the well-being of at-risk families and children. The Administration for Children and Families, the Health Resources and Services Administration, and the study team are working out the details of the study design. Below are answers to some questions states and their implementing agencies may have about the study.

How will state and local programs be selected for the study and how many will be selected?

Local programs in the evaluation will reflect the national diversity of communities implementing MIECHV programs and the populations they serve. Local programs will operate one of four models that meet HHS' criteria for evidence-based models and that were chosen by at least 10 states for their MIECHV programs: Early Head Start – Home Visiting, Healthy Families America, Nurse Family Partnership, or Parents as Teachers. Approximately 85 local home visiting program sites in 12 states are expected to be selected to participate. Some types of states (for example, those that have never operated one of these home visiting program models before) may be excluded from consideration. States with a larger number of local program sites or greater diversity within state of urban and rural locations might have a greater chance of being selected in order to ensure that the study includes a sufficient number of diverse families.

Is participation in the study required, and will information be kept confidential?

As a condition of receipt of the MIECHV funds, states had to provide assurances that, if asked, they would participate in the legislatively-mandated evaluation. Participation by families in evaluation sites is voluntary, and families may opt out of any and all data collection activities. All information collected from program staff and families will be kept private to the extent allowed by the law.

If the program models are already considered evidence-based, why is this study necessary?

Previous studies of the effectiveness of home visiting programs have found some positive effects, but research methods have been inconsistent across studies of different program models. Prior studies also often lack information about how services were delivered and which kinds of families experience the greatest benefits. In addition, states' MIECHV programs are operating under different conditions than the programs in many prior studies, with different supports and requirements. This new study will provide information about programs as they operate under MIECHV. It will systematically gather standard information about nearly 5,100 families across all of the evidenced-based models. The study will use a mix of research methods to analyze states' needs assessments, measure the effects of home visiting programs overall and across programs and populations, examine how program features are associated with service delivery and impacts, and analyze the economic costs of operating home visiting programs. Most

critically, this study answers the call from legislators for on-going research to inform federal funding of home visiting programs.

Will the study mean that programs serve fewer families than before?

No, a local program site's participation in the study should have no bearing on the number of families it serves. Those programs participating in the evaluation will need to have more families apply than they can serve. Many home visiting programs are only able to work with a fraction of the families and children in their communities who might benefit from these services. The study is looking for local programs that can recruit at least 60 eligible families in 12-15 months to be entered into a lottery-like process called random assignment to select half of the families to enroll in home visiting services. The families who are not selected for home visiting will form a comparison group and may be referred to other services in the community. As necessary, the research team will work closely with each program to build on their existing outreach and assessment processes to help recruit additional families.

Is it unethical to use random assignment to decide which families receive services?

No, it is not unethical to use random assignment to determine who receives services. Many people see random assignment as a fair way to allocate scarce program slots when there are more eligible applicants than a program can serve. In fact, some families not selected for the program may be more willing to accept that this was due to the "flip of a coin" rather than to their personal characteristics. Before it is finalized, the study design will be reviewed by an Institutional Review Board to ensure that families in the study will be treated fairly.

How will random assignment affect a program's normal intake procedures?

To the extent possible, programs will follow their normal intake procedures. The study team will work to develop a process that minimizes the disruption of program operations as much as possible. For example, the staff who assess parents for eligibility into the program will not be expected to enroll families into the study or collect data for the study. After eligibility is determined, a research team member will collect information needed by the study and conduct the lottery process. The local program will then begin to provide services to those families who are randomized into the group that receives program services. The study team selected by HHS has extensive experience with studies of this type and is sensitive to the needs and concerns of program operators.

What data will programs provide to the study team?

Programs will not have to collect any special information from families. Most data about families in the study are expected to come from surveys conducted with families in the program and comparison groups by the study team. However, the study also plans to collect information about how the program operates in each local site. This may include gathering program policies and administrative records, interviews with state administrators, videotaped observations of selected home visits, annual web-based surveys of local staff, and weekly completion of web-

based activity logs by home visitors and supervisors. Home visiting program staff may be asked to host a program visit by the research team.

Who will be doing the study?

The Department of Health and Human Services selected a team of four organizations to conduct the study: MDRC (the lead), James Bell Associates, Johns Hopkins University, and Mathematica Policy Research. The team collectively has extensive experience designing and carrying out innovative large-scale national random assignment evaluations of social service programs. Team members are also responsible for much of the most recent research on home visiting programs, including the *Design Options for Maternal, Infant, and Early Childhood Home Visiting Evaluation (DOHVE)*, the Home Visiting Evidence of Effectiveness (HomVEE) review, local and cross-site evaluations of Supporting Evidenced-Based Home Visiting Initiative (EBHV), as well as random assignment studies of home visiting programs in Alaska, Hawaii, and New Jersey.

How can I contact the study team?

For more information please contact: Sharon.rowser@mdrc.org or Lauren.supplee@acf.hhs.gov

Interested in being a MIHOPE site?

The Mother and Infant Home Visiting Program Evaluation (MIHOPE) research team is looking for home visiting programs to participate in a large-scale evaluation. Home visiting programs are recognized as an important strategy for providing support services to families with young children. Programs are diverse, widely used across the country, and generally aim to provide information, referrals, and parenting support to reduce child maltreatment, improve maternal and child health, and improve early school readiness. The recent growth in federal funding to support the scale up of evidenced-based programs provides an unprecedented, critical opportunity for program and research collaboration at the Federal, State, and community levels.

The U.S. Department of Health and Human Services, Administration for Children and Families and the Health Resources and Services Administration are sponsoring MIHOPE. The study, mandated by the Affordable Care Act, is designed to build knowledge for policymakers and practitioners about the effectiveness of the new federally funded Maternal, Infant and Early Childhood Home-Visiting Program (MIECHV) in improving outcomes for at-risk children and families.

What are the benefits of my program participating?

- Recognition to your program distinguishing your practices and demonstrating your commitment to rigorous research on program effectiveness.
- A strong evidence base to inform public funding for home visiting and national family policies.
- Knowledge about what difference home visiting programs make, for whom they make more difference, and why.
- Feedback about program participation.
- Funds to support staff participation in research activities.

What types of programs are needed?

- Operating at least one of four models that meet HHS' criteria for evidence-based models: Early Head Start - Home Visiting, Healthy Families America, Nurse Family Partnership, or Parents as Teachers.
- Experienced offering home visiting services for two years or more.
- Can recruit at least 60 new families within a 12-15 month time period and provide services to at least 30 families.
- Willing to implement research procedures.

What steps are involved with participation in the evaluation?

- **Step 1. Meet with the study team to learn more about the evaluation and provide information.** Through a series of telephone calls and in-person meetings, study team members will contact state level organization and later implementing agencies to describe the study and learn more about the local MIECHV programs. This information will be used to help the team choose which states and sites will be included in the evaluation. Each telephone call is expected to last one hour and in-person meetings are expected to last half a day. The study team and federal partners will use the information shared to determine the locations that are a good fit for the study. As you may remember, the MIECHV legislation requires this national evaluation and your state provided assurances about your willingness to participate in the evaluation, if selected.
- **Step 2. Discuss the research design and reach agreement on roles and responsibilities.** The study team will meet with local program sites (e.g. their leadership, staff, referral sources, and any other appropriate individuals) to further discuss what participation in the study would mean and begin to design research procedures. Agreements will be executed between the local program and the study team to describe the roles and responsibilities of each during the course of the study. • •
- **Step 3. Prepare for research data collection.** The study team will work with program staff from each local program site to finalize the research procedures. The study team will provide materials and train appropriate staff on how to implement the process.
- **Step 4. Implement evaluation procedures.** The study team will enroll families into the study. Most data about families in the study are expected to come from surveys conducted with families by the study team. However, some data may come from the local program sites. This may include videotaped observations of selected home visits, annual web-based surveys of local staff, and weekly completion of web-based activity logs by home visitors and supervisors. All information collected for the evaluation will be kept private to the extent allowed by law.
- **Step 5. Monitor and provide feedback.** The study team will monitor the research procedures and provide assistance as needed. Program implementation data will be shared periodically. The study team will visit the program to complete implementation research activities.

Mother and Infant Home Visiting Program Evaluation

List of site information to be provided by State lead MIECHV agency

Thank you for taking time to prepare information for your next call with the study team. As a reminder, the U.S. Department of Health and Human Services has contracted with MDRC to evaluate the federal Maternal, Infant and Early Childhood Home Visiting program (MIECHV). We are scheduling a one-hour telephone call with you to collect some information about each MIECHV local program in your state to help us choose states and local programs for the evaluation. As you may remember, the MIECHV legislation requires this national evaluation and your state provided assurances about your willingness to participate in the evaluation, if selected. All information provided in these discussions will be kept private to the extent permitted by law.

Below is the information we hope to collect from you about each MIECHV local program in your state:

- Name of the agency that is an intermediary between the local program site and the state. (If all funding goes directly to local program site, then not necessary).
- Name and contact information for the local organization using MIECHV funds.
- What county is the local organization located in?
- What type of organization is the local program? (health, education, social service, other)
- Which of the four evidence-based program models are being delivered by the organization?
- Has the program been operating the model continuously since July 2010? If not and there is an intermediary agency, then has the intermediary agency operated the model continuously since July 2010?
- Approximately how many families enroll per year? How many of those families continue receiving services for at least a year?
- Are military families served by the program?

Protocol for Screening-Call with State Administrator

Thank you for taking time to talk to the MIHOPE study team. As a reminder, the U.S. Department of Health and Human Services has contracted with MDRC to evaluate the federal Maternal, Infant and Early Childhood Home Visiting program (MIECHV). We are using this one-hour telephone call to collect some information about each MIECHV local program in your state to help us choose states and local programs for the evaluation. As you may remember, the MIECHV legislation requires this national evaluation and your state provided assurances about your willingness to participate in the evaluation, if selected. All information provided in these discussions will be kept private to the extent permitted by law.

Local Program Site Information

- **Administering Agency Name:** Indicate the name of the agency that is an intermediary between the local program site and the state. (If all funding goes directly to local program site, write N/A)
- **Site Name:** Fill in the name and contact information of the local home visiting program (a separate office with supervision that is located in the community being served).
- **County Name(s):** Fill in the name of the county or counties where the local program site is located.
- **Site Organization Type:** Select the type of organization the local program site is from the drop-down menu. (Options - Health, Education, Social Service, Other)
- **Model:** Indicate what model is being implemented in the local program site (Options: Early Head Start-Home Visiting, Healthy Families America, Nurse Family Partnership, Parents as Teachers, Other (specify)).
- **Model Experience at Site:** Indicate whether the local program site has been operating the model continuously since July 2010. (“Yes” or “No” Only) The answer to this question will help the study team understand whether the program has operated the model for more than 2 years.
- **Model Experience at Admin Agency:** If the answer above is “no” and there is an intermediary administrative agency, then indicate whether the administrative agency has worked with the model continuously since July 2010. (“Yes” or “No” or “NA” only).
- **Number of Families:** Indicate the estimated number of new families who enroll per year (Options – Exact number or select a range: 1-20-, 21-40, more than 40). This is intended to help the study team understand the number of sample points that may enroll between summer 2012 and spring 2014. Indicate calculation methods in the *Notes* section.
- **Evaluation Activities:** Describe any planned or existing evaluations the state or its local home visiting program sites may be involved in. Note the sample for the evaluations to help the team understand whether the MIHOPE sample may overlap with the evaluation.

- **Notes:** Fill in with any special remarks. For example, notes about how the number of families per year was calculated. Whether the state administrator seemed amenable to the study.