OMB Control No:	
Expiration Date:	
Length of time for instrument: 1.25 hours	

ATTACHMENT 14: MIHOPE SUPERVISOR SURVEY_ 12 MONTH

8/27/2013

OMB Control No:	
Expiration Date:	

SUPERVISOR SURVEY - 12 MONTH

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).

The Mother and Infant Home Visiting Program Evaluation (MIHOPE) is designed to build knowledge for policymakers and practitioners about the effectiveness of MIECHV.

One objective of MIHOPE is to learn about the role of supervisors in home visiting programs. We are requesting that you complete this survey because you are a staff member in one of the home visiting programs participating in MIHOPE. Your answers will help us to understand your role in the home visiting program and your perspective on the home visiting program.

Your answers will be kept private to the extent allowed by law. Only the research team will have access to this information. Your answers will not be shared with anyone at your program or any other agencies. In our research reports, the information you provide will not be attributed by name to you or your individual program.

The survey will begin on the next page.

- It will take about 1 hour and 15 minutes to complete this survey.
- If you are unsure how to answer a question, please give the best answer you can rather than leaving it blank.
- If you have questions at any time during the study, please call MDRC toll-free at 1-877-305-6372 or email mihope@mdrc.org.
- To thank you, we will be sending you a gift card for \$30.

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Supervisor Survey_12 Month

A. DEMOGRAPHICS

1.	What was the highest level/degree you completed in school?
	□ Some High School, no degree [SKIP TO 3] □ High School/GED [SKIP TO 3] □ Vocational/technical training program □ Some college, no degree □ Training program degree (e.g, nursing diploma) □ Associate's degree (e.g, AA, AS, ADN) □ Bachelor's degree (e.g., BA, BS, BSN) □ Master's degree (e.g., MA, MS, MSW, MSN) □ Professional degree (e.g., LLB, LD, MD, DDS) □ Doctorate degree (e.g., PhD, EdD)
2.	Field of study: CHECK ALL THAT APPLY. (Responses not limited to highest degree completed.)
	☐ Child development ☐ Early childhood education ☐ Education ☐ Psychology ☐ Social work/Social welfare ☐ Nursing ☐ Other (specify)
3.	Are you of Hispanic, Latino/a or Spanish origin? One or more categories may be selected.
	 □ No, not of Hispanic, Latino/a, or Spanish origin □ Yes, Mexican, Mexican American, Chicano/a □ Yes, Puerto Rican □ Yes, Cuban □ Yes, Another Hispanic, Latino/a or Spanish origin
4.	What is your race? One or more categories may be selected.
	 □ White □ Black or African American □ American Indian or Alaska Native □ Asian Indian □ Chinese □ Filipino □ Japanese MIHOPE Supervisor Survey - Baseline: Page 1

	 □ Korean □ Vietnamese □ Other Asian □ Native Hawaiian □ Guamanian or Chamorro □ Samoan □ Other Pacific Islander □ Other
5.	What is your age?
	☐ Under 20 years ☐ 20-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60 or older
6.	What is your sex?
	☐ Male ☐ Female
B. EN	MPLOYMENT HISTORY
In this	section, we would like to know about your employment history prior to working at your current .
1.	Prior to your current position, did you have experience providing home visiting services to families?
	☐ No [SKIP TO 4] ☐ Yes
2.	In which models do you have prior experience providing home visiting services to families? CHECK ALL THAT APPLY.
	 □ Nurse Family Partnership □ Parents as Teachers □ Healthy Families America □ Early Head Start □ Other (specify):
3.	How many total years of prior experience do you have providing home visiting services?
	□ Less than 1 year□ 1-2 years□ 3-5 years□ 5-10 years

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		OMB Control No: Expiration Date:
		☐ More than 10 years
	4.	Do you have prior experience working with high risk families in any of the following settings? CHECK ALL THAT APPLY.
		□ In-home child care □ Daycare □ Preschool □ School, grades K-12 (non-nurse) □ After school program □ Special education program □ Nurse □ School nurse □ Home health care □ Other health care □ Social services □ Mentoring programs □ Mental health agencies □ No prior experience □ Other (specify):
	5.	How many total years of experience supervising home visitors do you have at this or another agency?
		☐ None ☐ Less than 1 year ☐ 1-2 years ☐ 3-5 years ☐ 5-10 years ☐ More than 10 years
C.	CU	JRRENT EDUCATION AND POSITION
	1.	When did you begin your present job as a supervisor? Please enter the month and year in numeric format. If you cannot recall which month you began, please leave it blank.
		MonthYear
2.	Have you completed a training program, or earned a degree, certificate, or credential since you began your present job as a supervisor?	
		□ No [SKIP TO 5]□ High School diploma/GED [SKIP TO 4]□ Vocational/technical training program certificate

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	OMB Control No: Expiration Date:
	☐ Training program degree (e.g., nursing diploma) ☐ Professional credential (e.g., CDA) ☐ Associate's degree (e.g., AA, AS, ADN) ☐ Bachelor's degree (e.g., BA, BS, BSN) ☐ Master's degree (e.g., MA, MS, MSW, MSN) ☐ Professional degree (e.g., LLB, LD, MD, DDS) ☐ Doctorate degree (e.g., PhD, EdD) ☐ Other certification or licensure for your job (specify):
3.	ield of study for this training program, degree, certificate or credential: CHECK ALL THAT APPLY.
	☐ Child development ☐ Early childhood education ☐ Education ☐ Psychology ☐ Social work/Social welfare ☐ Nursing ☐ Other (specify)
4.	When did you complete this training program, degree, certificate or credential? Please enter the nonth and year in numeric format. If you cannot recall which month you began, please leave it lank. MonthYear
Are	ou currently enrolled in school to obtain a degree, certificate, or credential?
	 No, not currently enrolled [SKIP TO 7] ☐ High School diploma/GED [SKIP TO 7] ☐ Vocational/technical training program certificate ☐ Training program degree (e.g., nursing diploma) ☐ Professional credential (e.g., CDA) ☐ Associate's degree (e.g., AA, AS, ADN) ☐ Bachelor's degree (e.g., BA, BS, BSN) ☐ Master's degree (e.g., MA, MS, MSW, MSN) ☐ Professional degree (e.g., LLB, LD, MD, DDS) ☐ Doctorate degree (e.g., PhD, EdD) ☐ Other certification or licensure for your job (specify):
Fie	of study for this degree, certificate, or credential: CHECK ALL THAT APPLY.
	 □ Child development □ Early childhood education □ Education □ Psychology □ Social work/Social welfare □ Nursing □ Other (specify)

5.

6.

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		OMB Control No: Expiration Date:
7.	How many hours do you work in a typical week?	
	HOURS:	

8. In a typical week, how do these [Q2 ANSWER] hours break down across these activities?

Please enter the number of hours you spend doing each of the following activities in a typical week. You can enter part of an hour for an activity that is less than an hour. Please enter 0 for activities you do not typically complete.

Providing one-on-one supervision	
Providing group supervision	
Observation of home visits	
Home visiting (including first visits)	
Recruiting families	
Preparing for home visits	
Travel to home visits	
Transporting families	
Initial assessments and eligibility screens	
Time spent on the phone	
Staff group meetings	
Paperwork	
Data entry into computer	
Receiving supervision	
Training	
Other (specify amount):	
licated [HOURS] hours are spent in other a f activities this entails. Other activity types:	ctivities during the w

9. How likely are you to leave your present job in the next 12 months?

□ Very unlikely□ Somewhat unlikely□ Somewhat likely□ Very likely

10. Do you supervise home visitors in any other home visiting programs?

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			ol No: Date:
		☐ No [SKIP TO SECTION E] ☐ Yes	
	11.	What model do these other home visiting programs use? CHECK ALL THAT A Nurse Family Partnership Parents as Teachers Healthy Families America Early Head Start Other (specify):	PPLY.
Ξ.	SUPERV	/ISION	
	1. How ma	nany home visitors do you supervise?	
	2. Please ra	rate the size of your current supervisor to home visitor ratio:	
		□ Lighter than you are able to handle□ About right□ Heavier than you are able to handle	
		past 6 months, how often have you had a supervisor to home visitor ratio that v what you could handle effectively?	vas more
		 □ Never □ Rarely □ Sometimes □ Often □ Always 	

		OMB Control No: Expiration Date:
hon	out how often, on average, do you have scheduled one-on-one super me visitor? Supervision meetings are meetings in which you provide foir ir home visiting caseload.	_
	 □ Weekly or more frequently □ Every two weeks □ Every three weeks □ Monthly □ Once every 1-3 months □ Once every 4-6 months □ Once a year □ Never 	
5. How	v often do you use a form to guide one-on-one supervision? All of the time (100%) Nearly all of the time (85%-99%) Most of the time (61%-84%) About half of the time (40%-60%) Some of the time (15%-39%) Nearly none of the time (1-14%) None of the time (0%)	
6. Abc	out how often, on average, do you have group supervision meetings	with home visitors?
	 □ Weekly or more frequently □ Every two weeks □ Every three weeks □ Monthly □ Once every 1-3 months □ Once every 4-6 months □ Once a year □ Never 	

OMB Control No: Expiration Date:
7. How do you monitor home visitor performance? CHECK ALL THAT APPLY
 □ Review my supervision notes □ Review specific cases in paper records □ Review specific cases in management information system □ Review reports I generate □ Review reports that are routinely generated by our program □ Other (specify):
SUPERVISION OBSERVATION
1. Do you ever observe home visitors in actual visits or by reviewing video-recordings of their visits as part of supervision?
 □ No [SKIP TO SECTION G] □ Views video recordings only □ Observes in person only □ Views video recordings and observes in person
2. Do you observe all home visitors or only under certain conditions? CHECK ALL THAT APPLY.
 Observes all home visitors Observes home visitors who are newly hired Observes home visitors who request to be observed Observes home visitors who need extra help Observes home visitors under other conditions (specify):
3. For each home visitor, about how many times do you observe a home visit?
□ Less than one time per year □ One time per year □ Two times per year □ Three times per year □ Four times per year □ Five times per year □ Six to ten times per year □ Eleven or more times per year
4. Do you use any specific tool(s) for observing home visits?
☐ Yes, what is the name of the tool(s)?☐ No
5. When you observe a home visit, what types of feedback do you give to the home visitor? CHECK ALL THAT APPPLY \square Written feedback on a standard form
 □ Written feedback not on a standard form □ Verbal feedback with explicit areas for improvement □ Verbal feedback with little specific instruction □ I do not give feedback

F.

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G. TECHNOLOGY RESOURCES

1.	Do you have laptops/tablets/iPads for use during observation of home visits?
	☐ Yes
	□ No
2.	Do you have an appropriate, private space to conduct one-on-one supervision?
	☐ Yes
	□ No
3.	How do you document your notes from supervision sessions with home visitors? CHECK ALL THAT
	APPLY.
	\square In writing on paper forms
	☐ Electronically on laptops/tablets/iPads
	☐ Electronically when I am at an office computer
	☐ I do not document notes from supervision sessions [SKIP TO SECTION H]
	□ Other (specify):
4.	How easy is it for you to document your notes from supervision sessions with home visitors?
	☐ Very easy in all respects
	☐ Easy in most respects
	☐ Easy in some respects
	☐ Not at all easy
5.	Are any of your notes from supervision sessions entered into your program's management
٠.	information session?
	□ Yes
	□ Yes
	□ 140

H. WELL-BEING

<u>Instructions:</u> Thinking about your relationships in <u>general</u>, please indicate the extent to which you agree or disagree with each of the twenty-nine statements. The scale ranges from 1 (totally disagree) to 6 (totally agree). Please select only one response for each statement. There are no wrong or right answers; please select the answer that most generally applies to you.

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		Totally Disagre e	Strongly Disagre e	Disagre e	Agre e	Strongl y Agree	Totall y Agree
1.	I feel confident that other people will be there for me when I need them.						
2.	I prefer to depend on myself rather than other people.						
3.	I prefer to keep to myself.						
4.	Achieving things is more important than building relationships.						
5.	Doing your best is more important than getting on with others.						
6.	If you've got a job to do, you should do it no matter who gets hurt.						
7.	It's important to me that others like me.						
8.	I find it hard to make a decision unless I know what other people think.						
9.	My relationships with others are generally superficial.						
10	Sometimes I think I am no good at all.						
11	I find it hard to trust other people.						
12	I find it difficult to depend on others.						
13	I find that others are reluctant to get as close as I would like.						

			OMB Control No: Expiration Date:				
14	I find it relatively easy to get close to other people.						
15	I find easy to trust others.						
16	I feel comfortable depending on other people.						
17 ·	I worry that others won't care about me as much as I care about them.						
18	I worry about people getting too close.						
19	I worry that I won't measure up to other people.						
20	I have mixed feelings about being close to others.						
21	I wonder why people would want to be involved with me.						
22	I worry a lot about my relationships.						
23	I wonder how I would cope without someone to love me.						
24	I feel confident about relating to others.						
25	I often feel left out or alone.						
26	I often worry that I do not really fit with other people.						
27	Other people have their own problems, so I don't bother them with mine.						
28	If something is bothering me, others are generally aware and concerned.						
29	I am confident that other people will like and respect me.						

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<u>Instructions:</u> For each statement, please choose which best describes how you have been feeling in the past week: Rarely or none of the time; some or a little of the time (1-2 days), occasionally (3-4 days), or most of the time (5-7 days).

		Rarely or None of the Time	Some or a Little of the Time (1-2 days)	Occasionall y (3-4 days)	Most of the Time (5-7 days)
30	I felt depressed.				
31	I felt that everything I did was an effort.				
32	My sleep was restless.				
33	I was happy.				
34	I felt lonely.				
35	People were unfriendly.				
36	I enjoyed life.				
37	I felt sad.				
38	I felt that people disliked me.				
39					

. I could not get going.

I. ORGANIZATIONAL SOCIAL CONTEXT MEASURE

This is a copyrighted measure. © The University of Tennessee Children's Mental Health services Research Center, 2006. Organizational Social Context (OSC). The scale may not be used without the express written consent of the Children's Mental Health Services Research Center.

J. PROGRAM OUTCOMES

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<u>Instructions:</u> In this section, we would like to learn how *staff members* perceive their program's intended outcomes. In general, a *program outcome* is a benefit to a child, parent, or family. For example, some programs might see the improvement of prenatal health as an important outcome.

Below is a list of possible outcomes for home visiting programs. We know your program may care about all of these benefits for your families. However, we would like to get a sense of which outcomes you think **your program** believes may be more important than others. We would like you to check the box that best represents what you think your program believes about the outcome.

To help you decide on an outcome's rank, think about whether it is discussed routinely in training and supervision. Think about what staff in your agency are told about its importance. Check the box that best describes your program's ranking of this outcome.

					am aims to ac est, and not sr		w much	of a priori	ty is <u>pro</u>	moting_
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All										Highest Priority
	_		-		am aims to ac		w much	of a priori	ty is <u>pre</u>	venting_
0	1	2	3	4	5	6	7	8	9	10
Not a Priority at All					Moderate Priority					Highest Priority
3. Consident breastfee		of the ou	tcomes yo	our progr	am aims to ac	hieve, ho	w much	of a priori	ty is <u>pro</u>	moting_
0	1	2	3	4	5	6	7	8	9	10
Not a					Moderate					Highest
Priority at All					Priority					Priority

								OMB Control No: Expiration Date:					
								Expira	וטוו בוטוו	.e:			
	_		•	. •	am aims to a , such as god			•		moting			
0	1	2	3	4	5	6	7	8	9	10			
Not a					Moderate					Highest			
Priority					Priority					Priority			
at All													

										No: e:
5. Conside family pla				our progr	am aims to acl	nieve, ho	w much o	of a priori	ty is <u>pro</u>	moting_
□ 0 Not a Priority at All	1	2	3	4	5 Moderate Priority	6	7	8	9	□ 10 Highest Priority
6. Consido and reduc	_		-	our progr	am aims to acl	nieve, ho	w much o	of a priori	ty is <u>pre</u> v	venting
□ 0 Not a Priority at All	1	2	3	4	□ 5 Moderate Priority	6	7	8	9	☐ 10 Highest Priority
	_		-		am aims to acl estance use pro		w much o	of a priori	ty <u>is pre</u> v	venting
□ 0 Not a Priority at All	1	2	3	4	5 Moderate Priority	6	7	8	9	☐ 10 Highest Priority
8. Conside				our progr	am aims to acl	nieve, ho	w much o	of a priori	ty is <u>pre</u>	venting
□ 0 Not a Priority at All	1	2	3	4	□ 5 Moderate Priority	6	7	8	9	☐ 10 Highest Priority
	-		•		am aims to acl hing goals for (moting_
□ 0 Not a	□ 1	□ 2	□ 3	□ 4	□ 5 Moderate	□ 6	□ 7	8	9	□ 10 Highest

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Priority

Priority

Priority

								OMB (Control 1	No:
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at All										
children's	prevent	ive healtl	<u>n care</u> , su	ch as hav	gram aims to a ving all recomn of their home t	nended v	vell-child	visits, bei		_
O Not a Priority at All	1	2	3	4	5 Moderate Priority	6	7	8	9	☐ 10 Highest Priority
	arenting	behavior	s, such as		gram aims to a ng, encouragin			-	-	_
0 Not a Priority at All	1	2	3	4	5 Moderate Priority	6	7	8	9	☐ 10 Highest Priority
12. Considerated and reduced to the second s					gram aims to a	chieve, h	ow much	of a prio	rity is <u>pr</u>	eventing
0 Not a Priority at All	1	2	3	4	5 Moderate Priority	6	□ 7	8	9	☐ 10 Highest Priority
	_		-		gram aims to a nd social- emot			of a prio	rity <u>is pr</u>	omoting

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5

Moderate

Priority

6

7

8

9

□ 10

Highest

Priority

0

Not a

Priority

at All

2

3

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M. IMPACTS

Please express your agreement or disagreement with the statements below. We are interested in knowing your thoughts about families who are currently receiving services or who have completed the program.

I fee	el that as a result of the					Slightly		Strongly
1	ices my program site has	Strongly		Slightly		Disagre	Disagre	Disagre
prov	vided	Agree	Agree	Agree	Neutral	e	е	e
1.	Expectant women are more			П		П		
	likely to get adequate							
	prenatal care.							
2.	More expectant women have							
	healthy nutrition and exercise	_			_	_	_	_
	habits while pregnant.							
3.	More babies are born full-							
	term and normal weight.							
4.	More mothers have healthy							
	eating and exercise habits							
_	outside of pregnancy.							
5.	Mothers are more likely to							
	space their births.				П		П	П
6.	Fewer mothers use tobacco.							
7.	Fewer mothers have problem alcohol and other drug use.							
8.	Mothers are better able to							
0.	recognize and address mental							
	health issues.							
9.	Fewer mothers are	_	_	_	_	_	_	_
'.	depressed.							
10.	Fewer mothers have high		П		П		П	П
-0.	parenting stress.	_			_	_	_	_
11.	Mothers are better able to	_	_	_	_	_	_	_
	recognize and address							
	partner violence.							
12.	More mothers develop							
	relationships with people							
	they can count on.							
13.	More mothers get the public							
	benefits for which they							
	qualify.							
14.	More families become							
	economically self sufficient.							
15.	Mothers are more likely to							П
	start and continue							
	breastfeeding.							

OMB Control No:	_
Expiration Date:	_

I fee	l that as a result of the					Slightly		Strongly
	ices my program site has	Strongly		Slightly		Disagre	Disagre	Disagre
	vided	Agree	Agree	Agree	Neutral	е	е	е
16.	More mothers use positive							
	child behavior management							
	techniques.							
17.	More mothers support their				П	П		
	children's cognitive and							
	language development.							
18.	More mothers support their							
	children's social-emotional							
	development.							
19.	Children have better cognitive							
	and language development.							
20.	More children are securely							
	attached.							
21.	Fewer children are abused or							
	neglected.							
22.	Fewer homes have safety							
	hazards.							
23.	More children are up to date							
	on their shots and well child					Ш		
	care.							
24.	Fewer children have injuries							
	requiring medical care.							

L. EXPECTATIONS

Think about the expectations that you have for the home visitors you supervise. Please express your agreement or disagreement with the statements below.

	pect home visitors to help thers	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
1.	Have a healthy lifestyle prenatally, such as good nutrition, exercise and prenatal care.							
2.	Develop a healthy lifestyle outside of pregnancy, such as good nutrition, exercise and preventive health care.							
3.	Space their births.							
4.	Reduce their tobacco use.							
5.	Recognize and deal with problem alcohol and other							

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-	pect home visitors to help hers	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
	drug use.							
6.	Recognize and deal with mental health issues.							
7.	Recognize and deal with partner violence.							
8.	Get the public benefits for which they qualify.							
9.	Become economically self-sufficient.							
10.	Start and continue breastfeeding.							
11.	Use positive child behavior management techniques.							
12.	Support their children's cognitive and language development.							
13.	Support their children's social-emotional development.							
14.	Baby-proof their homes.							
15.	Secure high quality child care.							
16.	Make sure their children are up to date on shots and well child care.							

M. EFFECTIVENESS

Please express your agreement or disagreement with the statements below. We are interested in knowing your thoughts about the home visitors you currently supervise.

hon	el I am effective in supervising ne visitors in how they help thers	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
1.	Have a healthy lifestyle prenatally, such as good nutrition, exercise and prenatal care.							
2.	Develop a healthy lifestyle outside of pregnancy, such as good nutrition, exercise and preventive health care.							
3.	Space their births.							
4.	Reduce their tobacco use.							

OMB Control No:	_
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I fee	I I am effective in supervising					cl: Lul		6 1 1
	ne visitors in how they help	Strongly		Slightly		Slightly Disagre	Disagre	Strongly Disagre
mot	hers	Agree	Agree	Agree	Neutral	e	e	e
5.	Recognize and deal with							
	problem alcohol and other							
	drug use.							
6.	Recognize and deal with		П		П		П	
	mental health issues.							
7.	Recognize and deal with		П		П		П	
	partner violence.							
8.	Get the public benefits for		П		П		П	
	which they qualify.							
9.	Become economically self-		П		П		П	
	sufficient.							
10.	Start and continue		П				П	
	breastfeeding.	_						
11.	Use positive child behavior		П				П	
	management techniques.	_						
12.	Support their children's		_	_		_		
	cognitive and language							
	development.							
13.	!!	_	_	_	_	_		_
	social-emotional							
	development.							
14.	Baby-proof their homes.							
15.	Secure high quality child care.							
16.	Make sure their children are					_		_
	up to date on shots and well							
	child care.							

N. COMFORT

Please express your agreement or disagreement with the statements below. We are interested in knowing your thoughts about the home visitors you currently supervise.

hon	el comfortable supervising ne visitors on how they work h mothers to	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
1.	Have a healthy lifestyle prenatally, such as good nutrition, exercise and prenatal care.							
2.	Develop a healthy lifestyle outside of pregnancy, such as good nutrition, exercise and							

OMB Control No:	_
Expiration Date:	_

	el comfortable supervising ne visitors on how they work	Strongly		Slightly		Slightly Disagre	Disagre	Strongly Disagre
with	n mothers to	Agree	Agree	Agree	Neutral	e	e	e
	preventive health care.							
3.	Space their births.							
4.	Reduce their tobacco use.							
5.	Recognize and deal with					_		
	problem alcohol and other							
	drug use.							
6.	Recognize and deal with							
	mental health issues.							
7.	Recognize and deal with							
•	partner violence.							
8.	Get the public benefits for							
9.	which they qualify.							
9.	Become economically self- sufficient.							
10.	Start and continue							
10.	breastfeeding.							
11.	Use positive child behavior		_					_
	management techniques.							
12.	Support their child's cognitive							
	and language development.							
13.	Support their child's social-	П		П	П	П	П	
	emotional development.							
14.	Baby-proof their homes.							
15.	Secure high quality child care.							
16.	Make sure their children are							
	up to date on shots and well							
	child care.							

O. TRAINING

Think about your training and the home visitors you currently supervise at your program site. Please express your agreement or disagreement with the statements below.

sup	I feel I am adequately trained to supervise home visitors to help mothers		Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
1.	Have a healthy lifestyle prenatally, such as good nutrition, exercise and prenatal care.							
2.	Develop a healthy lifestyle outside of pregnancy, such as							

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supe	el I am adequately trained to ervise home visitors to help hers	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
	good nutrition, exercise and							
	preventive health care.							
3.	Space their births.							
4.	Reduce their tobacco use							
5.	Recognize and deal with							
	problem alcohol and other							
	drug use.							
6.	Recognize and deal with mental health issues.							
7.	Recognize and deal with partner violence.							
8.	Get the public benefits for which they qualify.							
9.	Become economically self- sufficient.							
10.	Start and continue breastfeeding.							
11.	Use positive child behavior management techniques.							
12.	Support their children's cognitive and language development.							
13.	Support their children's socialemotional development.							
14.	Baby-proof their homes.							
15.	Secure high quality child care.							
16.	Make sure their children are up to date on shots and well child care.							

P. STRATEGIES AND TOOLS

Think about the strategies and tools provided by your program site. Please express your agreement or disagreement with the statements below.

use	program gives home visitors ful strategies and tools to help thers	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e
1.	Have a healthy lifestyle prenatally, such as good nutrition, exercise and prenatal care.							

OMB Control No:	_
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use	program gives home visitors ful strategies and tools to help thers	Strongly Agree	Agree	Slightly Agree	Neutral	Slightly Disagre e	Disagre e	Strongly Disagre e	
2.	Develop a healthy lifestyle								
	outside of pregnancy, such as		П						
	good nutrition, exercise and							_	
	preventive health care.								
3.	Space their births.								
4.	Reduce their tobacco use.								
5.	Recognize and deal with	_							
	problem alcohol and other								
	drug use.								
6.	Recognize and deal with								
	mental health issues.								
7.	Recognize and deal with								
	partner violence.								
8.	Get the public benefits for								
	which they qualify.								
9.	Become economically self-								
	sufficient.								
10.	Start and continue								
	breastfeeding.								
11.	Use positive child behavior								
40	management techniques.								
12.	Support their children's								
	cognitive and language								
10	development.								
13.	Support their children's social-emotional				Ιп				
	development.								
14.	-		П						
15.									
16.	Make sure their children are								
10.	up to date on shots and well	П							
	child care.								

Q. FEEDBACK

Think about the feedback that you provide to home visitors. Please express your agreement or disagreement with the statements below.

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l .	effective in giving home							
l .	ors positive and constructive					Slightly		Strongly
	lback on how they work with	Strongly		Slightly		Disagre	Disagre	Disagre
	hers to	Agree	Agree	Agree	Neutral	е	е	е
1.	Have a healthy lifestyle							
	prenatally, such as good							
	nutrition, exercise and prenatal							
	care.							
2.	Develop a healthy lifestyle							
	outside of pregnancy, such as							
	good nutrition, exercise and							
_	preventive health care.							
3.	Space their births.							
4.	Reduce their tobacco use.							
5.	Recognize and deal with							
	problem alcohol and other drug							
	use.							
6.	Recognize and deal with their							
	mental health issues.							
7.	Recognize and deal with							
_	partner violence.							
8.	Get the public benefits for							
	which they qualify.							
9.	Become economically self-							
	sufficient.							
10.	Start and continue							
	breastfeeding.							
11.	Use positive child behavior							
40	management techniques.							
12.	Support their children's						П	
	cognitive and language							
40	development.							
13.	Support their children's social-							
4.4	emotional development.				П			П
14.	Baby-proof their homes.							
15.	Secure high quality child care.							Ш
16.	Make sure their children are up							
	to date on shots and well child							
	care.						1	

R. MIECHV

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The following questions are about how your program has changed recently as a result of MIECHV funding. Each question has 7 response choices, please choose the response which is closest to how you feel. You may pick a response that is between the labeled response choices.

For example, if you feel that your job is a little easier than before, you should answer as below:

At tne My job	present time, as is	a result of N	AIECHV,							
, ,	Much easier than before		X	About the same as before			Much harder than before □			
At the	present time, as	a result of N	ИIECHV,							
1.	My work is			About the			Much			
	Much easier than before			About the same as before			harder than before			
2.	My role is Much clearer than before	П	П	About the same as before	П	П	Much less clear than before			
•	N. 4	<u></u>								
3.	My responsibili Much greater than before	□		About the same as before			Much less than before □			
4.	My program sit	My program site operates								
	Much more efficiently than before			About the same as before			Much less efficiently than before			
5.	The time I sper	nd on docum	entation is							
	Much greater than before			About the same as before			Much less than before □			
6.	The quality of t	the services	my site provi	des is						
	Much higher	МІНО	PE Superviso	About the or Survey - Baseli	ne: Page 25		Much lower			

												ntrol No: n Date:
	than before						ne as fore	i				than before
	7. My program's Much broader than before	benefits for fam	nilies	are.		san	ut th me as fore					Much narrower than before
S.	FACTORS FOR	SERVICE DEL	IVE	RY								
visi	e following question tors. Each question pose the response a	has 7 response	choi	ces k	etw	een	two	opp	osite	ends of th	e spectrum	
	example, if you fee ected to do, you sh			-	ough	tim	e in	visits	s to de	o everythi	ng home v	isitors are
1.	There is too home visit to do that my program	=				X						n have to search order to fill up
1.	There is too littl on-one supervisio things that my pro	n to do all the										ch for things to an hour of

one-on-one supervision.

me to do.

					OMB Control No: Expiration Date:
2.	The home visitor's role in promoting positive parenting is too rigidly defined; they don't have the flexibility they need to tailor services.				The home visitor's role in promoting positive parenting is not defined well enough; they don't know what they are expected to do with families.
3.	The home visitor's role in addressing parenting risks is too rigidly defined; they don't have the flexibility they need to tailor services.				The home visitor's role in addressing parenting risks is not defined well enough; they don't know what they are expected to do with families.
4.	The home visitor's role in promoting family economic self-sufficiency is too rigidly defined; they don't have the flexibility they need to tailor services.				The home visitor's role in promoting family economic self-sufficiency is not defined well enough; they don't know what they are expected to do with families.
5.	My program defines service tailoring completely and provides training to build home visitors' skills in tailoring.				My program does not define service tailoring very clearly and does not provide training in building home visitors' skills in tailoring.
6.	It is clear to home visitors which parts of their job are the most important to carry out with each family.				It is hard for home visitors to decide which parts of their job are the most important to carry out with each family.
7.	The home visitor's role is only to help the mother address issues that she herself already recognizes.				The home visitor's role is to help the mother address issues she already recognizes AND to help her recognize and address those she does not yet recognize.
8.	The home visitor's role is only to help mothers who are already motivated to take action.				The home visitor's role is both to help mothers who are already motivated to take action AND to motivate those who are not yet ready to take action.

					OMB Control No: Expiration Date:
9.	The home visitor's role is to promote positive parenting only by reinforcing the positive parenting behaviors that she sees.				The home visitor's role is to promote positive parenting BOTH by reinforcing the positive behaviors that she sees AND to promote the mother's use of alternative approaches to negative parenting that she sees.
10	The home visitor's role is to promote positive parenting only by reinforcing appropriate parenting attitudes and beliefs.				The home visitor's role is to promote positive parenting by BOTH reinforcing appropriate parenting attitudes and beliefs AND to influence mothers to change inappropriate parenting attitudes and beliefs.
11 ·	All the activities of a home visitor's role fit together in a way that makes sense.				It is hard to see how all the activities of a home visitor's role fit together.
12	All of the activities home visitors are expected to carry out with families are important.				I question the value of many of the activities home visitors are expected to carry out with families.
13	It is clear how working toward one program goal with a family helps achieve the other program goals as well.				The goals of my program don't fit together well; working toward one program goal is a distraction from working toward other program goals.
14	I guide home visitors in how to tailor services to each family.				I let home visitors decide on their own how to tailor services to each family.
15	I guide home visitors in how to work with families when the family's goals are different from our program site's goals.				I let home visitors decide on their own how to balance program goals and family goals.

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T. HEALTH CARE SERVICES

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U. RESOURCES AVAILABLE TO YOU

<u>Instructions:</u> Next, we are interested in the guidance you provide to home visitors in your caseload regarding these service areas.

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Service Area

- A. Prenatal Health
- B. Maternal Physical Health
- c. Substance Use
- D. Stress and Mental Health
- E. Healthy Adult Relationships
- F. Family Economic Self-Sufficiency
- **G.** Parenting to Support Child Development
- н. Parenting to Support Child Health

1.	On average, about how often do you provide a home visitor with guidance about [SERVICE AREA] ?
	☐ Never [SKIP TO 3]
	☐ Once a week
	☐ Once every two weeks
	☐ Once a month
	☐ Once every couple of months
	☐ Once every 6 months
	☐ Once a year
	☐ Less frequently than once a year
2.	Overall, how responsive have home visitors been to your guidance concerning [SERVICE AREA]?
	☐ None are responsive
	\square A few are responsive
	☐ About half are responsive
	☐ Most are responsive
	☐ All are responsive
3.	Besides you, do your home visitors have easy access to one or more other professionals to consult with about [SERVICE AREA]?
	□ No [SKIP TO Q1 FOR NEXT SERVICE AREA]□ Yes
	☐ Not sure [SKIP TO Q1 FOR NEXT SERVICE AREA]
4.	As part of supervision, how often do you suggest home visitors consult with these professionals about [SERVICE AREA]?
	□ Never
	☐ Once a week
	☐ Once every two weeks
	☐ Once a month
	☐ Once every couple of months
	☐ Once every 6 months

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	☐ Once a year ☐ Less frequently than once a year
5.	How many of your home visitors have accessed these professionals in the past six months?
	 None A few About half Most All Don't Know
6.	How helpful do you believe these professionals have been to your home visitors?
	 Never helpful Rarely helpful Sometimes helpful Frequently helpful Always helpful

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[GO TO Q1 FOR NEXT SERVICE AREA]

V. RATING OF SUPERVISION

1. For this question, we would like you to think about what occurs day-to-day at your work place. Read the following statements and consider how true they are for you and your place of employment. Please rank the following statements on a scale with 1 being the lowest and 5 being the highest:

		Strongly		Neutra		Strongly
		Disagree	Disagree	I	Agree	Agree
		1	2	3	4	5
a.	I have adequate support from my supervisor to make appropriate decisions in my day-to-day work.					
b	My supervisor encourages my input and respects my ideas.					
c.	My supervisor is responsive to me.					
d	My supervisor is knowledgeable about the specific work I do (e.g., issues related to families and children).					

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2. This question also asks you to think about your own direct supervisor. The chart below lists traits that may or may not describe your supervisor. Please rank the following traits for your supervisor on a scale with 1 being the lowest and 5 being the highest:

		Not at all True 1	Somewhat Not True	Neutra I 3	Somewhat True 4	Very True 5
a.	Positive attitude					
b	Team player/inclusivity of decision making					
c.	Approachability					
d	Patience					
e.	Understanding and empathy					
f.	Ability to set boundaries					
g.	Respectfulness					
h	Supportive advocate for staff					
i.	Appreciative of individual skills, needs, and interests					
j.	Accessible					
k.	Helps me solve problems and get information					

<u>3. Instructions:</u> The following table describes areas towards which supervisors work at becoming successful. Think about your own direct supervisor and rank how strong you believe s/he is in each of these areas. Use the description below for the definition of each numbered ranking. If you have never observed your supervisor in this area, select N/A.

Rankings are defined as:

- 1. Serious Issue A pressing need to address.
- 2. Weakness Results have fallen short in this area.
- 3. Skilled/OK The manager does what is expected and is about the same as most others.
- 4. Talented Notable strength in this area; manager is better than most and could be a coach in this area.
- 5. Towering Strength Manager is outstanding in this area and is a role model.

Please rank how strong you believe your supervisor is in each of these areas:

			3	4	5	
	1	2	Skille	Talente	Towerin	
	Seriou	Weak	d	d	g	N/
	s Issue	-ness	/OK		Strength	Α
Listening:						

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		1 Seriou s Issue	2 Weak -ness	Skille d /OK	Talente d	Towerin g Strength	N/ A
	Practices attentive and active listening. Has patience to hear people out. Can accurately restate the opinions of others even when not in agreement.						
b	Composure:						
•	Is cool under pressure. Does not become defensive or irritated when times are tough. Is considered mature. Can be counted to hold things together during tough times. Can handle stress. Is not knocked off balance by the unexpected. Is a settling influence in a crisis.						
C.	Decision-Making Ability: Makes good decisions based on a mixture of analysis, wisdom, experience, and judgment. Most solutions or suggestions turn out to be correct and accurate. Sought out by others for advice.						
d	Sociocultural Diversity:						
•	Deals effectively with all races, nationalities, cultures, disabilities, and ages, and both sexes. Supports fair and equal treatment for all. Is aware of sociocultural issues and their effect on clients and colleagues. Makes room for sociocultural discussion in team discussions.						
е	Knowledge Base						
٠	Has mastery of the content of early childhood development and early childhood mental health. Knows how to engage families and is effective at intervention strategies. Is a resource for other team members. Shares knowledge readily and effectively.						
f.	Directing/Supervising Others: Is good at establishing clear guidelines. Sets stretch goals. Distributes workload appropriately. Lays out work in a well-						

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		1 Seriou s Issue	2 Weak -ness	3 Skille d /OK	4 Talente d	5 Towerin g Strength	N/ A
	planned manner. Maintains two-way dialogue. Brings out the best in people. Is a clear communicator. Provides support as needed. Helps others meet their goals.						
g	Informing:						
•	Provides the information people need to know to do their jobs and feel good about being a member of the team. Provides individuals with information so that they can make accurate decisions. Is timely with information.						
h	Motivating Others:						
•	Knows what motivates others or how to do it. People who work with the supervisor want to do their best. Empowers others. Many people want to work for this leader. Is a good reader of others. Motivates others.						
i.	Training Ability: Conceptualizes and organizes ideas for effective learning. Balances content and process in training. Is able to create training materials that are helpful to others. Is able to present ideas to a diverse group. Is well prepared. Facilitates training well.						