

ATTACHMENT B: FOCUS GROUP CONSENT FORM

FOCUS GROUP: PARTICIPANT INFORMED CONSENT

Study Title: Home Visiting Career Trajectories

Principal Investigator: Heather Sandstrom, Ph.D

Funder: The Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services

Introduction/Purpose

You are invited to participate in the “Home Visiting Career Trajectories” study. The Office of Planning, Research, and Evaluation in the Administration for Children and Families, in collaboration with the Health Resources and Services Administration, in the U.S. Department of Health and Human Services is funding the study and hired the Urban Institute to conduct it. The Urban Institute research team is talking with small groups of home visitors across the country. You were chosen for this study because you are a home visitor.

The goal of this study is to learn more about the size, characteristics, and career trajectories of the home visiting workforce, as well as the kinds of professional development and training available to home visitors. Before you decide to be a part of this study, you need to know the benefits and risks of joining the study.

Procedure

You will be a member of a focus group. A focus group is a small group of people who are asked questions about a certain topic. The main topic for discussion is your experiences as a home visitor. A researcher will lead the group, ask the questions, and take notes about your answers. We would like to audio record the focus group to help us fill in our notes in case we missing anything. Your supervisors will not be a part of the focus group and they will not have access to the recording or the notes. If you do not feel comfortable being audio recorded, please let us know.

There are no “right” or “wrong” answers to the questions. We are interested to learn about your experiences with and what you think or feel about your position as a home visitor. You don’t have to answer any or all of the questions. You can leave the focus group at any time. The focus group will not exceed two hours.

Benefits

Your answers will help us learn how home visitors come into this field, why they stay or why they leave, how they can be better supported in their roles, and about their medium- and long-term career trajectories. You may not benefit directly from taking part in this focus group.

Risks

There are no known risks to you for taking part in this study. You may feel that some questions are sensitive, such as whether you are happy working at this home visiting agency. If any question makes you feel uncomfortable, you don't have to answer it.

Privacy

The research team will keep information that you share private as we develop notes and reports about the study. Our reports will not include your name or any other information that could be used to identify you. Recordings from the focus group will be stored in a secure digital folder that can be used by only the researchers in this study. Notes from the focus group will be locked in an office. We will keep all records that we produce private to the extent of the law.

Participation is Voluntary

Your participation in this study, if you agree to take part, is voluntary. You have the right to stop your participation at any time without penalty. You also have the right to not answer any or all questions during the focus group.

Questions

If you have any questions about this focus group, including those about your rights as a member of the study, you may contact the Principal Investigator: Heather Sandstrom (202-261-5833 or HSandstrom@urban.org) or the Institutional Review Board that approved this research: Everett Madden (202-261-5632 or EMadden@urban.org). You may also contact the Federal Project Officer, in the Office of Planning, Research, and Evaluation: Tia Zeno (202-401-5079 or Tia.Zeno@acf.hhs.gov)

Agreement Statement

Do you agree to participate in the Home Visiting Career Trajectories focus group?

Yes _____ No _____

Date of consent: _____

Name of focus group moderator (print): _____

Participant signature: _____

Participant name (print): _____

This information collection 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Urban Institute (Attn: Heather Sandstrom), 2100 M Street, NW, Washington, D.C. 20037.

All participants will receive a copy of this consent form for their records.