

ATTACHMENT C

FRONT LINE STAFF SURVEY INVITATION AND REMINDER EMAIL



**SUBJECT:** Online Staff Survey for Evaluation of OAH TPP Grant

Dear [FIRST NAME]:

We are reaching out today for your help with the IMAGIN cross-site study being conducted by Mathematica Policy Research on behalf of the Office of Adolescent Health of the Teen Pregnancy Prevention grant program. This study is part of our contract to provide technical assistance and learn about your experiences with early implementation (called the IMAGIN study). Your organization's [FILL PROGRAM NAME] is part of this study. Mathematica has been working with [FILL GRANTEE STUDY CONTACT] and you have been identified to complete this staff survey, to help us understand the perspectives and experiences of staff who are delivering [FILL PROGRAM NAME].

Your input on this survey will help us to understand the early stages of implementation of your sexual risk avoidance education or sexual risk reduction program. This survey asks questions about (1) the program you are implementing and its target population, (2) your role and prior experiences, (3) the training and preparation provided to staff, (4) your experiences with implementation and data collection for evaluation, (5) key lessons learned, and (6) your background. The survey should take about 30 minutes to complete.

To complete the survey online, please click the link below and enter your password.

**Survey link:** [\[LINK TO SURVEY\]](#)

**Password:** [PASSWORD]

Your responses will be kept private. Your identity and/or organizational affiliation will not be revealed in reports, presentations, or articles and will not be recognizable to anyone beyond the research team. We will use a study identification number to track responses and follow up with non-respondents.

In any reporting, we will not include your name or title. All responses will be reported as a group response only, for example, "Most program staff reported that . . ."

Completion of this survey is voluntary. There is no compensation for completing this survey. You may refuse to answer specific questions or discontinue your participation at any time without any penalty. There are no right or wrong answers to these questions.

If you have any questions about the survey or your participant, please reach out to [XXX at Ph Number] or email [TPPEvalTA@mathematica-mpr.com](mailto:TPPEvalTA@mathematica-mpr.com). Thank you for your participation!

**Paperwork Reduction Act Statement**

The described collection of information 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 number for the described information collection is 0990-new-60D and the expiration date is xx/xx/xxxx.

**SUBJECT:** Reminder-Please Complete the Online Staff Survey

Dear [FIRST NAME]:

This is just a reminder to complete your online staff survey for the IMAGIN study.

To complete the survey, please click the link below and enter your password. The survey should take about 30 minutes to complete.

**Survey link:** [LINK TO SURVEY]

**Password:** [PASSWORD]

If you have any questions about the survey or your participant, please reach out to...

Thank you for your participation!