

Appendix A - Outreach to State Grantees

Email Templates

State Lead LIA [If grantee considered for LIA interviews only]

Dear [State lead],

I'm writing on behalf of the researchers from the Family Level Assessment and State of Home Visiting (FLASH-V) project. The FLASH-V project team is contracted by the Administration for Children and Families (ACF), Office of Planning Research and Evaluation (OPRE), in collaboration with HRSA, to study the processes used by MIECHV funded home visiting programs to recruit and enroll families. As you know, many LIAs are not able to serve all eligible families referred to them. Through the FLASH-V project, we hope to inform strategies to ensure efficient and effective use of MIECHV resources when recruiting and enrolling families. A brief description of the project is attached to this email for more information.

The FLASH-V project team has decided that your state may be a good candidate for the LIA semi-structured interview component of this project. HRSA and ACF encourage your state's participation, if you are able.

If you are willing to help the team with this project, we are asking you to share some information about your LIAs to determine if they would be a good fit for participation in this project. You can share information in either of the following ways:

1. **Share LIA information via email:** You can provide the project team with LIA information so that they may reach out to some of your LIAs directly to determine their eligibility and interest in the project. If you would prefer this option, please complete the attached FLASH-V Eligibility Assessment Form by [insert date two weeks from email date]. The project team will use this information to determine which of your LIAs may be good candidates for the project, and will then reach out to them directly.
2. **Have a brief phone call with the project team to discuss your state's LIAs:** During a brief phone call, you can provide the project team with LIA information directly, or receive clarification about filling out the attached FLASH-V Eligibility Assessment Form. The project team will use this information to determine which of your LIAs may be good candidates for the project, and will then reach out to them directly. If you would prefer this option, please Reply All to this email letting us know by [insert date one week from email date]. The project

team will be in touch immediately to schedule a brief phone call to occur within the next two weeks.

Your assistance and participation in this project is completely voluntary and declining to allow your LIAs to participate **will not** impact your MIECHV award or standing with HRSA. We anticipate it would take approximately 30 minutes to provide this information either by phone or email.

Thank you in advance for your time and assistance with this project,

[State lead's Project Officer]

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 this information collection is 0970-0356 and the expiration date is 03/31/2018.

State Lead Local CI and LIA [If grantee can participate in both the LIA interview and a regional or local centralized intake agency interview]

Dear [State lead],

I'm writing on behalf of the researchers from the Family Level Assessment and State of Home Visiting (FLASH-V) project. The FLASH-V project team is contracted by the Administration for Children and Families, Office of Planning Research and Evaluation (OPRE), in collaboration with HRSA, to study the processes used by MIECHV funded home visiting programs to recruit and enroll families. As you know, many LIAs are not able to serve all eligible families referred to them. Through the FLASH-V project, we hope to inform strategies to ensure efficient and effective use of MIECHV resources when recruiting and enrolling families. A brief description of the FLASH-V project is attached to this email for more information.

The FLASH-V project team has decided that your state may be a good candidate for the LIA and/or centralized intake agency semi-structured interview component of this project. HRSA and ACF encourage your state's participation, if you are able.

If you are willing to help the team with this project, we are asking that you share some information about your LIAs and centralized intake agencies to determine if they would be a good fit for participation in this project. You can share information in either of the following ways:

- 1. Share LIA and centralized intake agency information via email:**
You can provide the project team with LIA and centralized intake agency information so that they may reach out to some of your LIAs and centralized intake agencies directly to determine their eligibility and interest in the project. If you would prefer this option, please complete the attached FLASH-V Eligibility Assessment Form by [insert

date two weeks from email date]. The project team will use this information to determine which of your LIAs and centralized intake agencies may be good candidates for the project, and will then reach out to them directly.

2. **Have a brief phone call with the project team to discuss your state's LIAs and centralized intake agencies:** During a brief phone call, you can provide the project team with LIA and centralized intake agency information directly, or receive clarification about filling out the attached FLASH-V Eligibility Assessment Form. The project team will use this information to determine which of your LIAs and centralized intake agencies may be good candidates for the project, and will then reach out to them directly. If you would prefer this option, please Reply All to this email letting us know by [insert date one week from email date]. The project team will be in touch immediately to schedule a brief phone call to occur within the next two weeks.

Your assistance and participation in this project is completely voluntary and declining to allow your LIAs and/or centralized intake agencies to participate **will not** impact your MIECHV award or standing with HRSA. We anticipate it would take approximately 30 minutes to provide this information either by phone or email.

Thank you in advance for your time and assistance with this project,

[State lead's Project Office

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 this information collection is 0970-0356 and the expiration date is 03/31/2018.

State Lead State CI [If grantee can participate in a state level centralized intake agency interview only]

Dear [State lead],

I'm writing on behalf of the researchers from the Family Level Assessment and State of Home Visiting (FLASH-V) project. The FLASH-V project team is contracted by the Administration for Children and Families, Office of Planning Research and Evaluation (OPRE), in collaboration with HRSA, to study the processes used by MIECHV funded home visiting programs to recruit and enroll families. As you know, many LIAs are not able to serve all eligible families referred to them. Through the FLASH-V project, we hope to inform strategies to ensure efficient and effective use of MIECHV resources when recruiting and enrolling families. A brief description of the FLASH-V project is attached to this email for more information.

The FLASH-V project team has decided that your state may be a good candidate for the centralized intake agency semi-structured interview component of this project because you are implementing a centralized intake

system at the state level. HRSA and ACF encourage your state's participation, if you are able.

If you are willing to help the team with this project, we are asking that you share some information about your centralized intake agency. You can share information in either of the following ways:

1. **Share centralized intake agency information via email:** You can provide the project team with the contact information for your centralized intake agency so that they may reach out to them directly to determine whether they are a good candidate and whether they may be interested in the project. If you would prefer this option, please respond to this email by [insert date one week from email date] with the following information:
 - Name and email of primary centralized intake agency contact person
 - Name of centralized intake agency
2. **Have a brief phone call with the project team to discuss your state's centralized intake agency:** During a brief phone call, you can provide the project team with centralized intake agency information directly, or receive clarification about filling out the attached FLASH-V Eligibility Assessment Form. The project team will use this information to determine whether your centralized intake may be a good candidate for the project, and will then reach out to them directly. If you would prefer this option, please Reply All to this email letting us know by [insert date one week from email date]. The project team will be in touch immediately to schedule a brief phone call to occur within the next two weeks.

Your assistance and participation in this project is completely voluntary and declining to allow your centralized intake agency to participate **will not** impact your MIECHV award or standing with HRSA. We anticipate it would take approximately 30 minutes to provide this information either by phone or email.

Thank you in advance for your time and assistance with this project,

[State lead's Project Officer]

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 this information collection is 0970-0356 and the expiration date is 03/31/2018.