



National Survey of Child and Adolescent Well-Being

RTI International • PO Box 12194 • Research Triangle Park, North Carolina 27709 • USA
Sponsored by: Administration for Children and Families

Conducted by: RTI International • The University of North Carolina at Chapel Hill • Washington University
in St. Louis

APPENDIX F: Memorandum of Agreement Template

[AGENCY ADMINISTRATOR/DIRECTOR]
[ADDRESS]

[1DATE]

Dear _____,

Thank you for agreeing to participate in the National Survey of Child and Adolescent Well-Being (NSCAW), a longitudinal study of children and families who come in contact with the child welfare system. This letter serves as an agreement between [COUNTY NAME(S)] and RTI International (RTI) regarding [COUNTY NAME(S)]'s participation in NSCAW. Participation in this study is voluntary.

Sponsored by the Administration for Children and Families of the U.S. Department of Health and Human Services, the study examines the characteristics and needs of children and families as they enter the system, their experiences while they are in the system and after they leave it, and their situations and outcomes throughout the study period.

Sample selection is scheduled to begin in June 2017, with baseline interviews with children, parents/caregivers, and caseworkers occurring between July 2017 and December 2018. Follow-up interviews with children and families are scheduled to occur through 2020. Over 80 counties have been selected across the U.S. to obtain a nationally representative sample of children and families. Approximately 55 children and families will be interviewed from each county for the study.

The provisions below describe the agreement between [COUNTY NAME(S)] and RTI.

Agency Responsibilities

1. Provide a designated Agency Liaison for your agency who will provide assistance and information to the NSCAW Field Representatives (FRs) at your site in preparing for and implementing the study in your agency.

This person is _____

Examples of the kinds of assistance the Agency Liaison will be asked to provide include:

- Providing an orientation to the agency organization and culture, which will help us carry out project work in ways that fit best with agency schedules and procedures.
- Providing the FR with the names and addresses of families selected for the sample. The FR will then send a letter and information about the study to those families and follow-up with a telephone call to schedule an appointment.

- Assisting the FR to locate the sampled child by providing the last known contact information or information about changes to the child’s living situation and current caregiver.
 - Providing or arranging for consent for the participation of sampled children who are in the custody of the state/agency.
 - Supporting and encouraging caseworker participation in interviews focused on sampled children in their caseload. The FR will contact caseworkers and schedule interviews when they are most convenient.
2. Provide a designated person from your agency who will compile and send, on a monthly basis for 12 months, closed maltreatment investigations, as well as cases that entered legal custody without an investigation, to RTI for sampling purposes. The files will include child identification numbers, demographic data, and case-level data (such as whether the child was placed in out of home care) that RTI will use to draw the child sample within your agency and (with legal guardian consent) to link participating children’s survey data to other administrative data (such as Medicaid data and data submitted to NCANDS and AFCARS).

This person is _____

We estimate that it will take approximately one hour per month, or 15 total hours, to prepare and submit the monthly files to RTI.

3. Provide a contact who will submit to RTI copies of NCANDS and AFCARS files already being submitted to the Children’s Bureau during the study period, as well as a crosswalk of encrypted and unencrypted child identification numbers. Only after legal guardian consent, RTI will link participating children’s survey data to this administrative data on maltreatment re-reports, placements, and adoptions.

This person is _____

Project Team Responsibilities

The project team will be responsible for carrying out all the day-to-day activities for the project and will make your agency’s participation as easy as possible.

The project team will:

1. Be a resource to the agency, responding to questions or concerns raised by agency staff, and ensure that agency concerns are communicated and addressed.
2. As needed, prepare an NSCAW research study package for review and secure state or county-level IRB approvals, data sharing agreements, or other formal approvals prior to initiating sampling or data collection activities.
3. Maintain the privacy of all personally identifiable information (PII) provided by the agency to the extent permitted by law. Data will be transmitted and stored in such a way that only members of the project team who are authorized and have need will have access to any

identifying information. Sample files will be maintained in a secure data archive at RTI until study completion when they will be destroyed.

4. Disseminate NSCAW reports or research briefs detailing study findings and any other relevant project updates. Data analyses and reports will not include any identifying information on children or families.

The NSCAW Field Representatives (FRs) will:

5. Conduct interviews with sampled children, parents/caregivers, and caseworkers; serve as liaison to the project team to ensure agency concerns are addressed; and be available to respond to questions about the project. The FR's supervisor will also be in contact with the Agency Liaison periodically to ensure that activities are going smoothly.
6. Protect the privacy of information provided by the agency and by NSCAW participants. Prior to conducting an interview, review with each participant a consent statement that includes assurances that the research team will protect the privacy of respondents to the fullest extent possible under the law, that respondents' participation is voluntary, and that they may withdraw their consent at any time without any negative consequences.

Note: There is one exception: if an FR or the project team thinks that a child's life or health is in danger, they will inform the appropriate county or state agency.

Your signature below indicates that you agree to the participation of [COUNTY NAME(S)] in NSCAW and to the specific agreements listed above.

NAME
TITLE

Date

Please fax or email a copy of this letter to Ms. Sarah Harris at 919-541-7400 or harris@rti.org and send the original to her in the enclosed envelope. Please keep a copy for your records.

If you have any questions, please do not hesitate to Sarah at 919-541-7486 or me at (312) 456-5247. You may also contact Dr. Christine Fortunato, the NSCAW Federal Project Officer, at (202) 401-5460.

Thank you in advance for your efforts and contributions. We greatly appreciate your commitment to NSCAW and to the children and families you serve.

Sincerely,

Melissa Dolan
RTI International
NSCAW Project Director

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 and expiration date for this collection are OMB #: 0970-0202, Exp: XX/XX/XXXX.