January 2019

OMB Control No.: 0970-0521
Expiration Date: 12/31/2021
Length of time for instrument: 5 minutes

MULTI-SITE IMPLEMENTATION EVALUATION OF TRIBAL HOME VISITING (MUSE)

RAPID REFLECT SELF-COMPLETED QUESTIONNAIRE - CAREGIVER

This collection of information is voluntary. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. 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 #: 0970-0521, Exp: 12/31/2021. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Kate Lyon, James Bell Associates; 3033 Wilson Blvd. Suite 650, Arlington, VA 22201; MUSE.info@jbassoc.com.

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Home visitor completes	this page
Caregiver's Program ID:	
Home visitor first name or Staff ID:	
Home visitor last name or Staff ID (leave blank if using Staff	D):

Go to next page then hand tablet to caregiver

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## **Caregiver Rapid Reflect**

1.	I felt comfortable talking with my home visitor today about myself and my family.		
		Strongly agree Agree Disagree Strongly disagree	
2.	I felt understo	elt understood by my home visitor today.	
		Strongly agree Agree Disagree Strongly disagree	
3.	How much of	ow much of what you did today is useful in your everyday life?	
		None A little Some Most All	
4.	Which of the f	Which of the following did you like most about today's home visit?	
		Getting useful information Feeling supported in my parenting Setting aside time to focus on my child Getting connected to other services (including transportation to services) Addressing a pressing need Having someone to talk to who understands my needs Getting support to achieve my goals for myself and my family	
5.	I'm glad I made the time for today's home visit.		
		Strongly agree Agree Disagree Strongly disagree	

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[NEXT SCREEN]

## THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY.

Please click 'Submit' to exit the survey.

[NEXT SCREEN]

Please stop here and return the tablet back to your home visitor.