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

**HOME VISITOR SURVEY**

# MUSE Home Visitor Survey

Thank you for taking part in the Multi-Site Implementation Evaluation of Tribal Home Visiting (MUSE). The purpose of this study is to learn about tribal home visiting programs and the experiences of families receiving home visiting services.

We are requesting that you complete this survey because you are a home visitor in one of the home visiting programs participating in MUSE. Your answers will help us understand your role in the home visiting program and your perspective on the program. Because home visitors' jobs are complex and involve many different tasks, this survey is also complex and a bit lengthy.

Your participation in this survey is voluntary. If you choose to participate, it will take about 1 hour and 10 minutes to complete this survey. If you are unsure how to answer a question, please give the best answer you can instead of leaving it blank.

Your answers will be kept private. Only the MUSE study team will have access to this information. Your answers will not be shared with anyone at your program or any other agencies. We will not report information collected in this study in a way that could identify you or your program.

We would appreciate your response by MM/DD/YYYY. If you have questions about the survey or at any time during the study, please call Tess Abrahamson at James Bell Associates at ### or email ____.

# A. BACKGROUND AND WORK EXPERIENCE

1. What was the highest level/degree you completed in school?
   - ☐ Some high school, no diploma
   - ☐ High school/GED
   - ☐ Some college/no degree
   - ☐ Technical training or certification
   - ☐ Associate's degree (e.g. AA, AS, ADN)
   - ☐ Bachelor's degree (e.g. BA, BS, BSN)
   - ☐ Master's degree or higher (e.g. MA, MS, MSW, MSN, PhD)

2. What were your main field(s) of study? CHECK ALL THAT APPLY. (Responses not limited to highest degree completed.)
   - ☐ Child development
   - ☐ Early childhood education
   - ☐ Education
   - ☐ Psychology
   - ☐ Social work/Social welfare
   - ☐ Public health
   - ☐ Nursing
   - ☐ Other (specify) _____

3. In what language(s) are you fluent enough to provide home visiting services? CHECK ALL THAT APPLY
   - ☐ English
   - ☐ Local Native language (specify) _____
   - ☐ Spanish
   - ☐ Other (specify) _____

4. Prior to your current position, did you have experience providing home visiting services to families?
   - ☐ No      → SKIP TO Question 5
   - ☐ Yes      → GO TO Question 4a

      4a. How many <u>total years</u> of experience do you have providing home visiting services, including your current home visiting program and any other home visiting programs?
      - ☐ Less than 1 year
      - ☐ 1-2 years
      - ☐ 3-5 years
      - ☐ 6-10 years
      - ☐ More than 10 years

5.  Do you have experience working with families in any of the following settings? CHECK ALL THAT APPLY
    ☐  In-home day care
    ☐  Center-based Daycare
    ☐  Preschool
    ☐  School, grades K-12 (non-nurse)
    ☐  School nurse
    ☐  After school program
    ☐  Special education program
    ☐  Nursing
    ☐  Home health care
    ☐  Other health care
    ☐  Social services
    ☐  Mentoring programs
    ☐  Mental health agencies
    ☐  No prior experience
    ☐  Other (specify): _____

6.  How many total years of professional experience do you have working with families and young children, including home visiting jobs and other jobs doing related work (e.g., years of nursing experience plus years as a parent educator in different settings)?
    ☐  Less than 1 year
    ☐  1-2 years
    ☐  3-5 years
    ☐  6-10 years
    ☐  More than 10 years

7.  Aside from your professional experience, how many years of experience do you have raising children? Please include experience you have as a primary caregiver for any child(ren) including your own and other's children. Please count experience providing regular, consistent care for a child as a primary caregiver. Do not include babysitting or infrequent assistance with children.
    Years of experience: _____

## B. CURRENT POSITION

1.  How many years have you worked for your home visiting program? Include years worked for your home visiting program in positions other than your current one.
    ☐  Less than 1 year
    ☐  1-2 years
    ☐  3-5 years
    ☐  6-10 years
    ☐  More than 10 years

2. In what month and year did you begin your present job as a home visitor?
   Month (Enter two digits for the month. For example, if you started in January enter "01". If you cannot recall which month you began, please leave this blank) _____ Year (Enter four digits for the year. For example, if you started in 2012, enter "2012") _____

3. How many hours do you work in a typical week?
   Hours (For example, enter "1.5" if you spend an hour and a half): _____

4. How many families are in your current caseload?
   No. of Families: _____

5. The size of your current caseload is…
   ☐ Lighter than you are able to handle effectively
   ☐ About right
   ☐ Heavier than you are able to handle effectively

6. In the past 6 months, how long have you had a caseload that was more than what you could handle effectively?
   ☐ Never
   ☐ Less than 1 month
   ☐ 1 month
   ☐ 2 months
   ☐ 3 months
   ☐ 4 months or longer

7. How likely is it that you will be in your current position 6 months from now?
   ☐ Very likely → GO TO Section C
   ☐ Somewhat likely → GO TO Question 7a
   ☐ Somewhat unlikely → GO TO Question 7a
   ☐ Very unlikely → GO TO Question 7a

   7a. [If Question 7 = somewhat likely, somewhat unlikely, very unlikely] What factors affect whether you will stay in your position? CHECK ALL THAT APPLY
   ☐ Salary
   ☐ Opportunities for advancement within the organization
   ☐ Funding for my position is uncertain
   ☐ Caring for children or other family members
   ☐ Pursue additional education or training
   ☐ Retire or stop working
   ☐ Moving out of the area
   ☐ The amount of data collection/paperwork I have to do with families
   ☐ Challenging work environment
   ☐ Other (specify) _____

# C. THE SERVICE ENVIRONMENT

This next section asks about the availability of services in the community you provide home visiting services to. If you serve multiple communities, please answer the questions to the best of your ability, thinking about the service environments of the communities you serve in general. You will be asked a series of questions about different service types, such as, prenatal care and mental health treatment.

[SERVICE TYPES – The following service types will prefill in question 1 below. Respondents will be asked about each service type once.]
  A.  Prenatal Care
  B.  Labor and Delivery
  C.  Breastfeeding Support
  D.  Primary Adult Healthcare
  E.  Family Planning and Reproductive Health Care
  F.  Substance Use (Alcohol and other drugs) Treatment
  G.  Mental Health Services
  H.  Domestic Violence Shelter
  I.  Domestic Violence Counseling/Anger Management
  J.  Job Training and Adult Education Services (including GED and ESL)
  K.  Employment Services
  L.  Pediatric Primary Care
  M.  Affordable Licensed Childcare
  N.  Early Intervention Services
  O.  Food Assistance
  P.  Basic Necessities (clothing, diapers, etc.)
  Q.  Transportation Services
  R.  Assistance with Housing
  S.  Dental Care
  T.  Legal Aid/Legal Services

1.  Is there at least one organization that provides the following types of services in your area?
    ☐  Yes    → GO TO Question 1a
    ☐  No      → SKIP TO next service type
    ☐  Don't know      → SKIP TO next service type

    1a.  [If Question 1 = Yes] For each type of service available in your area (as you indicated previously), how easy or difficult is it for the families you work with to get these services?
        ☐  Very easy    → SKIP TO next service type
        ☐  Somewhat easy     → SKIP TO next service type
        ☐  Somewhat difficult      → GO TO Question 1b
        ☐  Very difficult       → GO TO Question 1b
        ☐  Not sure    → SKIP TO next service type

1b.  [If Question 1a = relatively difficult or very difficult] For each type of service that is difficult for families to access (as you indicated previously, why is it hard for families to get services in this area?  (CHECK ALL THAT APPLY)

☐ Caregivers lack transportation to service
☐ Services or appointments are rarely available (e.g. few providers in the area, wait lists, etc.)
☐ Caregivers can't afford services
☐ Poor follow through by provider
☐ Difficulty meeting eligibility criteria
☐ Caregivers do not want to receive services from certain providers (e.g., lack of cultural competency, etc.)
☐ Home visitors are not confident in the service

## D. PERCEPTIONS OF PROGRAM

**Instructions:** In this section, we would like to learn how *staff members* perceive their program's intended outcomes. In general, a *program outcome* is a benefit to a child, parent, or family. For example, some programs might see the improvement of prenatal health as an important outcome.

Below is a list of possible outcomes for home visiting programs.  We know your program may care about all of these benefits, but we would like to know which is most important.  We would like to get a sense of which outcomes you think **your program believes are more important than others**.  Please select the response that best represents what you think your program believes about the outcome.

**To help you decide on an outcome's rank, think about whether it is discussed routinely in training and supervision. Think about what you are told about its importance.  Select the response that best describes your program's ranking of this outcome.**

1. How much of a priority is each of the following outcomes for your program, on a scale of 0 to 10?

0 = Not a Priority
5 = Moderate priority
10 = Highest priority

| | | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Not sure |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | Supporting prenatal health and obtaining prenatal care (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | Supporting postpartum health and obtaining postpartum care (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | Supporting breastfeeding | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

| | | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Not sure |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 4 | Supporting physical health outside of pregnancy and postpartum health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | Supporting family planning | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | Preventing and reducing alcohol, commercial tobacco, and other drug use | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | Promoting caregiver emotional well-being and preventing and reducing mental health problems or stress | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | Preventing and reducing domestic violence | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 9 | Supporting healthy adult relationships (with boyfriends/girlfriends, husbands/wives, partners, co-parents) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 10 | Increasing social support (support from family, friends, and community) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 11 | Furthering a caregiver's education and job training | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 12 | Supporting getting a job, or getting a better job | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 13 | Supporting child health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 14 | Ensuring appropriate child care arrangements | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 15 | Supporting parenting to promote child development | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 16 | Basic needs like food, utilities, housing, transportation, and identification | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 17 | Legal system and services | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 18 | Supporting good nutrition and physical activity | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 19 | Supporting caregivers in budgeting and making ends meet | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 20 | Addressing unresolved issues from past caregiver trauma | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 21 | Connecting to community and culture (attending community and/or cultural activities, learning cultural teachings, making new relationships with others in your community) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 22 | Supporting parent-child interaction | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

| | | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Not sure |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 23 | Supporting positive discipline and behavior management | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 24 | Supporting caregivers in feeding children (including formula and solids, and not including breastfeeding) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 25 | Helping caregivers to establish and maintain developmentally appropriate care/routines (daily routines like bedtime, mealtime, bath time) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 26 | Supporting effective co-parenting | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| 27 | Supporting child and home safety | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

2. Does your program expect you to develop a family goal plan with enrolled families? Your program might use a different name for this, such as an individualized family service plan or support plan. When we use the term "family goal plan" below, we are referring to a plan to guide and tailor home visiting to help families reach goals.
☐ No, my program doesn't expect me to develop family goal plans (skip to #3)
☐ Yes, my program expects me to develop family goal plans
☐ Not Sure (skip to #3)

2a. On the previous page, you indicated that your program expects home visitors to develop family goal plans. How much does your program agree or disagree with the following statements?

| | | Strongly agree | Agree | Disagree | Strongly disagree | Not sure |
|---|---|---|---|---|---|---|
| | **My program expects that …** | | | | | |
| 1 | every family should have a goal plan. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | the family should take the lead in developing the goal plan. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | goals should align with our program's priorities. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | goals should address family's specific parenting needs. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | the goal plan should guide what happens in visits. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | the family and I should review goal progress and update the goal plan regularly. | ☐ | ☐ | ☐ | ☐ | ☐ |

3.  How much do you agree or disagree with the following statements?

| | | Strongly agree | Agree | Disagree | Strongly disagree | Not sure |
|---|---|---|---|---|---|---|
| | **I think that…** | | | | | |
| 1 | It is valuable to work with families to develop a goal plan. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | Families find it useful to develop a goal plan. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | Families feel like I'm being pushy when I bring up goal plans. | ☐ | ☐ | ☐ | ☐ | ☐ |

4.  How much do you agree or disagree with the following statement: Your program provides all of the materials you need to cover the topics you want to with your families in home visits. Materials include home visiting model and any supplemental curricula, materials, and resources your program uses.
    ☐ Strongly agree
    ☐ Agree
    ☐ Disagree
    ☐ Strongly disagree

5.  How much do you agree or disagree with the following statement: The materials your program provides meet the unique needs, values and priorities of the families you work with. Materials include home visiting model materials and any supplemental curricula, materials, and resources your program uses.
    ☐ Strongly agree
    ☐ Agree
    ☐ Disagree
    ☐ Strongly disagree

6.  When planning home visits, how often do you independently find materials to use during home visits that are not provided by your model?
    ☐ Never
    ☐ Hardly any visits
    ☐ Some visits
    ☐ Most visits
    ☐ Every visit

7.  On average, how many hours do you spend each week planning home visits? (For example, enter "1.5" if you spend an hour and a half)
    _____ hours

8.   How many minutes do you typically spend planning a single home visit? (For example, enter "90" if you spend an hour and a half)
    _____ minutes

9. Where do you go to for support when planning for home visits? How often you consult the following for help when planning your home visits:

| | | Never | Hardly any visits | Some visits | Most visits | Every visit |
|---|---|---|---|---|---|---|
| 1 | Model curriculum, materials and resources | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | Supplemental curricula, materials and resources used by the home visiting program | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | Other home visitors | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | Supervisor | ☐ | ☐ | ☐ | ☐ | ☐ |

10. How effective is your program overall at making a difference for families in the following areas?

| | | Not at all effective | Somewhat effective | Mostly effective | Very effective |
|---|---|---|---|---|---|
| 1 | Prenatal health/prenatal care (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ |
| 2 | Postpartum health/postpartum care (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ |
| 3 | Breastfeeding | ☐ | ☐ | ☐ | ☐ |
| 4 | Physical health outside of pregnancy and postpartum health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ |
| 5 | Family planning | ☐ | ☐ | ☐ | ☐ |
| 6 | Alcohol, commercial tobacco, and other drug use | ☐ | ☐ | ☐ | ☐ |
| 7 | Caregiver emotional well-being, mental health or stress | ☐ | ☐ | ☐ | ☐ |
| 8 | Domestic violence | ☐ | ☐ | ☐ | ☐ |
| 9 | Healthy adult relationships (with boyfriends/girlfriends, husbands/wives, partners, co-parents) | ☐ | ☐ | ☐ | ☐ |
| 10 | Social support (support from family, friends, and community) | ☐ | ☐ | ☐ | ☐ |
| 11 | Furthering a caregiver's education and job training | ☐ | ☐ | ☐ | ☐ |
| 12 | Getting a job, or getting a better job | ☐ | ☐ | ☐ | ☐ |
| 13 | Child health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ |
| 14 | Making child care arrangements | ☐ | ☐ | ☐ | ☐ |
| 15 | Child development | ☐ | ☐ | ☐ | ☐ |
| 16 | Basic needs like food, utilities, housing, transportation, and identification | ☐ | ☐ | ☐ | ☐ |
| 17 | Legal system and services | ☐ | ☐ | ☐ | ☐ |
| 18 | Nutrition and physical activity | ☐ | ☐ | ☐ | ☐ |
| 19 | Budgeting/making ends meet | ☐ | ☐ | ☐ | ☐ |
| 20 | Trauma (things that happened in the past that affect caregiver today) | ☐ | ☐ | ☐ | ☐ |

| | | Not at all effective | Somewhat effective | Mostly effective | Very effective |
|---|---|---|---|---|---|
| 21 | Connecting to community and culture (attending community and/or cultural activities, learning cultural teachings, making new relationships with others in your community) | ☐ | ☐ | ☐ | ☐ |
| 22 | Parent-child interaction | ☐ | ☐ | ☐ | ☐ |
| 23 | Discipline/behavior management | ☐ | ☐ | ☐ | ☐ |
| 24 | Feeding children (including formula and solids, and not including breastfeeding) | ☐ | ☐ | ☐ | ☐ |
| 25 | Developmentally appropriate care/routines (daily routines like bedtime, mealtime, bath time) | ☐ | ☐ | ☐ | ☐ |
| 26 | Co-parenting | ☐ | ☐ | ☐ | ☐ |
| 27 | Child/home safety | ☐ | ☐ | ☐ | ☐ |

## E. PERCEPTIONS OF HOME VISITOR ROLE

1. How much do you focus on improving outcomes for…?

| | | Not at all | Very little | Somewhat | A lot |
|---|---|---|---|---|---|
| 1 | Index child | ☐ | ☐ | ☐ | ☐ |
| 2 | Other children in the family or household | ☐ | ☐ | ☐ | ☐ |
| 3 | Primary caregiver(s) | ☐ | ☐ | ☐ | ☐ |
| 4 | Other adults in the family or household | ☐ | ☐ | ☐ | ☐ |

2. Sometimes caregivers bring up topics during home visits that you haven't been trained to address. How often does this happen?

☐ Never
☐ Hardly any visits
☐ Some visits
☐ Most visits
☐ Every visit

3. What does your program expect you to do during the visit if something comes up that you haven't been prepared/trained to address?

☐ My program expects me just to explain that I can only work on things covered in the program
☐ My program expects me to direct the mother to a resource that CAN address this issue
☐ My program expects me to try to work on this issue even though I'm not trained to address it
☐ My program has no stated expectation for what I do
☐ Not sure

4.  Sometimes caregivers want visit activities to deviate from curricula and protocols. How often does this happen?

    ☐ Never
    ☐ Hardly any visits
    ☐ Some visits
    ☐ Most visits
    ☐ Every visit

5.  What does your program expect you to do <u>during the visit</u> if a caregiver wants to do things differently than in the program curricula or protocols?

    ☐ My program expects me to explain that I must follow the program curricula and protocols
    ☐ My program expects me to modify visit activities to align with the caregiver's preferences while still being true to the 'spirit' of the curriculum or protocol
    ☐ My program expects me to do things the way the caregiver prefers, even if this is very different from program curricula and protocols
    ☐ My program has no stated expectation for what I do in this situation
    ☐ Not sure

## F. SELF-EFFICACY

The next set of questions asks you to consider your own knowledge, skills and abilities needed to accomplish tasks related to providing home visits. Please do not consider external barriers like lack of funding or time, agency policies, or geography.

1. How confident are you that you can do the following things in most situations?

|   |   | Not at all confident | Not very confident | Somewhat confident | Mostly confident | Completely confident |
|---|---|---|---|---|---|---|
| 1 | Balance family preferences with program priorities | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | Communicate warmth, respect, and appreciation to the family | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | Develop and use family goal plans | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | Conduct required screenings | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | Tailor activities in response to family interests, concerns, and preferences | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | Build relationships and trust with caregivers and their families | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | Deliver home visiting curriculum the way my program and model intends | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | Model and coach parenting skills | ☐ | ☐ | ☐ | ☐ | ☐ |
| 9 | Identify and communicate strengths to caregivers | ☐ | ☐ | ☐ | ☐ | ☐ |

|    |                                                                          | Not at all confident | Not very confident | Somewhat confident | Mostly confident | Completely confident |
|----|--------------------------------------------------------------------------|:--:|:--:|:--:|:--:|:--:|
| 10 | Helping families access needed services                                  | ☐ | ☐ | ☐ | ☐ | ☐ |
| 11 | Collect data and information from caregivers                             | ☐ | ☐ | ☐ | ☐ | ☐ |
| 12 | Enter data and document what happens during home visits                 | ☐ | ☐ | ☐ | ☐ | ☐ |
| 13 | Plan home visits for families                                            | ☐ | ☐ | ☐ | ☐ | ☐ |
| 14 | Retain families and keep my caseload slots filled                       | ☐ | ☐ | ☐ | ☐ | ☐ |
| 15 | Deliver the expected number of home visits for each family              | ☐ | ☐ | ☐ | ☐ | ☐ |
| 16 | Support families in managing crises                                      | ☐ | ☐ | ☐ | ☐ | ☐ |
| 17 | Manage my time so that I can get everything done that I need to do       | ☐ | ☐ | ☐ | ☐ | ☐ |
| 18 | Engage an uninterested or distracted caregiver during a home visit      | ☐ | ☐ | ☐ | ☐ | ☐ |
| 19 | Engage an uninterested or fussy child during a home visit               | ☐ | ☐ | ☐ | ☐ | ☐ |
| 20 | Ensure my safety when making home visits                                 | ☐ | ☐ | ☐ | ☐ | ☐ |
| 21 | Engage fathers in home visits                                            | ☐ | ☐ | ☐ | ☐ | ☐ |
| 22 | Work with multigenerational families and non-traditional caregivers     | ☐ | ☐ | ☐ | ☐ | ☐ |

2. The next set of questions asks about working with caregivers around different topics or issues. How confident are you that you can address the following issues with families during home visits?

|   |                                                                                      | Not at all confident | Not very confident | Somewhat confident | Mostly confident | Completely confident |
|---|--------------------------------------------------------------------------------------|:--:|:--:|:--:|:--:|:--:|
| 1 | Prenatal health/prenatal care (including dental health/dental care)                  | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | Postpartum health/postpartum care (including dental health/dental care)             | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | Breastfeeding                                                                        | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | Physical health outside of pregnancy and postpartum health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | Family planning                                                                      | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | Alcohol, commercial tobacco, and other drug use                                     | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | Caregiver emotional well-being, mental health or stress                             | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | Domestic violence                                                                    | ☐ | ☐ | ☐ | ☐ | ☐ |

| | | Not at all confident | Not very confident | Somewhat confident | Mostly confident | Completely confident |
|---|---|---|---|---|---|---|
| 9 | Healthy adult relationships (with boyfriends/girlfriends, husbands/wives, partners, co-parents) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 10 | Social support (support from family, friends, and community) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 11 | Furthering a caregiver's education and job training | ☐ | ☐ | ☐ | ☐ | ☐ |
| 12 | Getting a job, or getting a better job | ☐ | ☐ | ☐ | ☐ | ☐ |
| 13 | Child health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 14 | Making child care arrangements | ☐ | ☐ | ☐ | ☐ | ☐ |
| 15 | Child development | ☐ | ☐ | ☐ | ☐ | ☐ |
| 16 | Basic needs like food, utilities, housing, transportation, and identification | ☐ | ☐ | ☐ | ☐ | ☐ |
| 17 | Legal system and services | ☐ | ☐ | ☐ | ☐ | ☐ |
| 18 | Nutrition and physical activity | ☐ | ☐ | ☐ | ☐ | ☐ |
| 19 | Budgeting/making ends meet | ☐ | ☐ | ☐ | ☐ | ☐ |
| 20 | Trauma (things that happened in the past that affect caregiver today) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 21 | Connecting to community and culture (attending community and/or cultural activities, learning cultural teachings, making new relationships with others in your community) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 22 | Parent-child interaction | ☐ | ☐ | ☐ | ☐ | ☐ |
| 23 | Discipline/behavior management | ☐ | ☐ | ☐ | ☐ | ☐ |
| 24 | Feeding children (including formula and solids, and not including breastfeeding) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 25 | Developmentally appropriate care/routines (daily routines like bedtime, mealtime, bath time) | ☐ | ☐ | ☐ | ☐ | ☐ |
| 26 | Co-parenting | ☐ | ☐ | ☐ | ☐ | ☐ |
| 27 | Child/home safety | ☐ | ☐ | ☐ | ☐ | ☐ |

## G. JOB SATISFACTION

1. The following questions ask how you feel about your job overall. How often do you feel this way?

|  |  | None of the time | A little of the time | Some of the time | Most of the time | All of the time |
|---|---|---|---|---|---|---|
| 1 | The work I do is satisfying. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | My job is boring. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | My job allows me to be creative. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | I feel respected at work. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | My job is frustrating. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | My work gives me a sense of accomplishment. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | My job is interesting. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | The work I do is important. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 9 | My job is overwhelming. | ☐ | ☐ | ☐ | ☐ | ☐ |

2. Think about your pay from this job. How much do you agree or disagree with the following about your pay?

|  |  | Strongly agree | Agree | Disagree | Strongly disagree | Not sure |
|---|---|---|---|---|---|---|
| 1 | I can depend on my paycheck to be regular and on time. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | The pay I get from this job is less than I deserve for the work that I do. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | The pay I get from this job is fair for my qualifications. | ☐ | ☐ | ☐ | ☐ | ☐ |

3. As you think about the pay you get from this job, which statement best describes your thoughts? The pay I get from this job is…
   - ☐ Barely enough to live on
   - ☐ Enough to cover my normal expenses
   - ☐ Enough to live comfortably

4.  For each job characteristic listed below, how satisfied or dissatisfied you are with your current job at the home visiting program in this regard.

| | | Very dissatisfied | Dissatisfied | Satisfied | Very satisfied |
|---|---|---|---|---|---|
| 1 | My job security | ☐ | ☐ | ☐ | ☐ |
| 2 | The amount of vacation time I receive | ☐ | ☐ | ☐ | ☐ |
| 3 | The amount of on-the-job stress | ☐ | ☐ | ☐ | ☐ |
| 4 | My chances for promotion | ☐ | ☐ | ☐ | ☐ |
| 5 | The size of my caseload | ☐ | ☐ | ☐ | ☐ |
| 6 | The amount of time required of me to get the job done | ☐ | ☐ | ☐ | ☐ |
| 7 | The amount time I spend traveling to home visits | ☐ | ☐ | ☐ | ☐ |
| 8 | The flexibility of my schedule | ☐ | ☐ | ☐ | ☐ |
| 9 | The health insurance benefits my employer offers | ☐ | ☐ | ☐ | ☐ |
| 10 | The retirement plan my employer offers | ☐ | ☐ | ☐ | ☐ |
| 11 | The amount of leave or schedule flexibility available for family and community obligations | ☐ | ☐ | ☐ | ☐ |
| 12 | The control I have over my daily work schedule | ☐ | ☐ | ☐ | ☐ |
| 13 | The physical workspace | ☐ | ☐ | ☐ | ☐ |
| 14 | Balancing the different tasks that are required of me | ☐ | ☐ | ☐ | ☐ |
| 15 | Being able to get my work done with the amount of interruptions I experience | ☐ | ☐ | ☐ | ☐ |
| 16 | The recognition I receive at work for my accomplishments | ☐ | ☐ | ☐ | ☐ |
| 17 | The amount of money I earn | ☐ | ☐ | ☐ | ☐ |
| 18 | My relationship with my immediate supervisor | ☐ | ☐ | ☐ | ☐ |
| 19 | My physical safety while doing my job | ☐ | ☐ | ☐ | ☐ |
| 20 | My relationships with my coworkers | ☐ | ☐ | ☐ | ☐ |
| 21 | The training and professional development opportunities available to me | ☐ | ☐ | ☐ | ☐ |
| 22 | How interesting the work is | ☐ | ☐ | ☐ | ☐ |
| 23 | My work-life balance | ☐ | ☐ | ☐ | ☐ |

| | | Very dissatisfied | Dissatisfied | Satisfied | Very satisfied |
|---|---|---|---|---|---|
| 24 | The mentoring and support I receive | ☐ | ☐ | ☐ | ☐ |
| 25 | My ability to contribute to others in a meaningful way | ☐ | ☐ | ☐ | ☐ |
| 26 | My job overall | ☐ | ☐ | ☐ | ☐ |

5. We are interested in learning about how your job relates to the community where you provide home visiting services. How much do you agree or disagree with the following statements?

| | | Strongly agree | Agree | Disagree | Strongly disagree | Not sure |
|---|---|---|---|---|---|---|
| 1 | The local community is very involved in shaping the home visiting services your home visiting program provides. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | My job makes me feel more connected to my community. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | I worry that my job has negatively impacted how I'm perceived in the local community. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | My job is meaningful to the local community. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | My job makes a positive difference in the local community. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | My job is contributing to a brighter future for the local community. | ☐ | ☐ | ☐ | ☐ | ☐ |

## H. PROFESSIONAL QUALITY OF LIFE

1. When you provide home visits to families you have direct contact with their lives. As you may have found, your compassion for those you provide home visits to can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a home visitor. Consider each of the following questions about you and your current work situation. How often did you experience these things in the last 30 days?

| | | Never | Rarely | Sometimes | Often | Always |
|---|---|---|---|---|---|---|
| 1 | I am happy. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | I am preoccupied with more than one person I provide home visits to. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | I get satisfaction from being able to provide home visits to people. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | I feel connected to others. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | I jump or am startled by unexpected sounds. | ☐ | ☐ | ☐ | ☐ | ☐ |

|    |                                                                                                                        | Never | Rarely | Sometimes | Often | Always |
|----|------------------------------------------------------------------------------------------------------------------------|-------|--------|-----------|-------|--------|
| 6  | I feel invigorated after working with those I provide home visits to.                                                   | ☐     | ☐      | ☐         | ☐     | ☐      |
| 7  | I find it difficult to separate my personal life from my life as a home visitor.                                        | ☐     | ☐      | ☐         | ☐     | ☐      |
| 8  | I am not as productive at work because I am losing sleep over the traumatic experiences of a person I provide home visits to. | ☐     | ☐      | ☐         | ☐     | ☐      |
| 9  | I think that I might have been affected by the traumatic stress of those I provide home visits to.                      | ☐     | ☐      | ☐         | ☐     | ☐      |
| 10 | I feel trapped by my job as a home visitor.                                                                             | ☐     | ☐      | ☐         | ☐     | ☐      |
| 11 | Because of my job as a home visitor, I have felt "on edge" about various things.                                        | ☐     | ☐      | ☐         | ☐     | ☐      |
| 12 | I like my work as a home visitor.                                                                                       | ☐     | ☐      | ☐         | ☐     | ☐      |
| 13 | I feel depressed because of the traumatic experiences of the people I provide home visits to.                          | ☐     | ☐      | ☐         | ☐     | ☐      |
| 14 | I feel as though I am experiencing the trauma of someone I have provided home visits to.                                | ☐     | ☐      | ☐         | ☐     | ☐      |
| 15 | I have beliefs that sustain me.                                                                                         | ☐     | ☐      | ☐         | ☐     | ☐      |
| 16 | I am pleased with how I am able to keep up with home visiting techniques and protocols.                                 | ☐     | ☐      | ☐         | ☐     | ☐      |
| 17 | I am the person I always wanted to be.                                                                                  | ☐     | ☐      | ☐         | ☐     | ☐      |
| 18 | My work makes me feel satisfied.                                                                                        | ☐     | ☐      | ☐         | ☐     | ☐      |
| 19 | I feel worn out because of my work as a home visitor.                                                                   | ☐     | ☐      | ☐         | ☐     | ☐      |
| 20 | I have happy thoughts and feelings about those I provide home visits to and how I could help them.                      | ☐     | ☐      | ☐         | ☐     | ☐      |
| 21 | I feel overwhelmed because my case load seems endless.                                                                  | ☐     | ☐      | ☐         | ☐     | ☐      |
| 22 | I believe I can make a difference through my work.                                                                      | ☐     | ☐      | ☐         | ☐     | ☐      |
| 23 | I avoid certain activities or situations because they remind me of frightening experiences of the people I provide home visits to. | ☐     | ☐      | ☐         | ☐     | ☐      |
| 24 | I am proud of what I can do as a home visitor.                                                                          | ☐     | ☐      | ☐         | ☐     | ☐      |
| 25 | As a result of home visiting, I have intrusive, frightening thoughts.                                                   | ☐     | ☐      | ☐         | ☐     | ☐      |
| 26 | I feel "bogged down" by the system.                                                                                     | ☐     | ☐      | ☐         | ☐     | ☐      |

|    |                                                                                          | Never | Rarely | Sometimes | Often | Always |
|----|------------------------------------------------------------------------------------------|-------|--------|-----------|-------|--------|
| 27 | I have thoughts that I am a "success" as a home visitor.                                  | ☐     | ☐      | ☐         | ☐     | ☐      |
| 28 | I can't recall important parts of my work with trauma victims.                            | ☐     | ☐      | ☐         | ☐     | ☐      |
| 29 | I am a very caring person.                                                                | ☐     | ☐      | ☐         | ☐     | ☐      |
| 30 | I am happy that I chose to do this work.                                                  | ☐     | ☐      | ☐         | ☐     | ☐      |
| 31 | The chronic stresses in the lives of people I provide home visits to make me depressed.   | ☐     | ☐      | ☐         | ☐     | ☐      |
| 32 | I take the stress of people I provide home visits to home with me.                        | ☐     | ☐      | ☐         | ☐     | ☐      |
| 33 | I get overwhelmed by the ongoing challenges faced by the people I provide home visits to. | ☐     | ☐      | ☐         | ☐     | ☐      |

## I. TRAINING

Earlier you answered questions about your program's overall system for supporting you in your work. Next are some questions more specifically about just the trainings you receive through your work with your home visiting program. Home visiting staff receive training on many different topics from different organizations.  Please include training received from your home visiting model, your agency, tribe, or other partnering organizations including state sponsored trainings.  Do not include supervision sessions with your direct supervisor or other provider.

1.  The training I receive provides me with everything I need to support the families I work with in the following areas:

|   |                                                                                                 | Strongly agree | Agree | Disagree | Strongly disagree |
|---|-------------------------------------------------------------------------------------------------|----------------|-------|----------|-------------------|
| 1 | Prenatal health/prenatal care (including dental health/dental care)                              | ☐              | ☐     | ☐        | ☐                 |
| 2 | Postpartum health/postpartum care (including dental health/dental care)                          | ☐              | ☐     | ☐        | ☐                 |
| 3 | Breastfeeding                                                                                    | ☐              | ☐     | ☐        | ☐                 |
| 4 | Physical health outside of pregnancy and postpartum health (including dental health/dental care) | ☐              | ☐     | ☐        | ☐                 |
| 5 | Family planning                                                                                  | ☐              | ☐     | ☐        | ☐                 |
| 6 | Alcohol, commercial tobacco, and other drug use                                                  | ☐              | ☐     | ☐        | ☐                 |
| 7 | Caregiver emotional well-being, mental health or stress                                          | ☐              | ☐     | ☐        | ☐                 |
| 8 | Domestic violence                                                                                | ☐              | ☐     | ☐        | ☐                 |
| 9 | Healthy adult relationships (with boyfriends/girlfriends, husbands/wives, partners, co-parents)   | ☐              | ☐     | ☐        | ☐                 |

| | | Strongly agree | Agree | Disagree | Strongly disagree |
|---|---|---|---|---|---|
| 10 | Social support (support from family, friends, and community) | ☐ | ☐ | ☐ | ☐ |
| 11 | Furthering a caregiver's education and job training | ☐ | ☐ | ☐ | ☐ |
| 12 | Getting a job, or getting a better job | ☐ | ☐ | ☐ | ☐ |
| 13 | Child health (including dental health/dental care) | ☐ | ☐ | ☐ | ☐ |
| 14 | Making child care arrangements | ☐ | ☐ | ☐ | ☐ |
| 15 | Child development | ☐ | ☐ | ☐ | ☐ |
| 16 | Basic needs like food, utilities, housing, transportation, and identification | ☐ | ☐ | ☐ | ☐ |
| 17 | Legal system and services | ☐ | ☐ | ☐ | ☐ |
| 18 | Nutrition and physical activity | ☐ | ☐ | ☐ | ☐ |
| 19 | Budgeting/making ends meet | ☐ | ☐ | ☐ | ☐ |
| 20 | Trauma (things that happened in the past that affect caregiver today) | ☐ | ☐ | ☐ | ☐ |
| 21 | Connecting to community and culture (attending community and/or cultural activities, learning cultural teachings, making new relationships with others in your community) | ☐ | ☐ | ☐ | ☐ |
| 22 | Parent-child interaction | ☐ | ☐ | ☐ | ☐ |
| 23 | Discipline/behavior management | ☐ | ☐ | ☐ | ☐ |
| 24 | Feeding children (including formula and solids, and not including breastfeeding) | ☐ | ☐ | ☐ | ☐ |
| 25 | Developmentally appropriate care/routines (daily routines like bedtime, mealtime, bath time) | ☐ | ☐ | ☐ | ☐ |
| 26 | Co-parenting | ☐ | ☐ | ☐ | ☐ |
| 27 | Child/home safety | | | | |

*[In Question 1 above, for topics that received disagree and strongly disagree ratings, GO TO Question 1a below. For topics that received agree or strongly agree ratings, SKIP TO next topic in Question 1.]*

1a.  [If Question 1 = disagree or strongly disagree] For each topic area in which you do not feel fully prepared to support families (as you indicated on the previous page), why do you not feel fully prepared to support families in this area? CHECK ALL THAT APPLY

☐  I didn't get enough training in this area.
☐  I didn't fully understand the training I received in this area.
☐  The training I received wasn't useful.
☐  I need something other than training to be able to support families in this area.
☐  My program doesn't focus on this area.

2. If you ask, can you attend trainings in specific areas relevant to your needs or professional goals?
   ☐ No
   ☐ Yes, I can once in a while when I ask
   ☐ Yes, I can about half the time I ask
   ☐ Yes, I can most of the times I ask
   ☐ Yes, I can every time I ask
   ☐ Not sure

3. How often do the trainings you attend directly relate to your day-to-day work with families?
   ☐ Never
   ☐ Rarely
   ☐ Sometimes
   ☐ Often
   ☐ Always

4. How often are the trainings you attend helpful and engaging?
   ☐ Never
   ☐ Rarely
   ☐ Sometimes
   ☐ Often
   ☐ Always

5. How often are the trainings you attend individualized to meet your needs?
   ☐ Never
   ☐ Rarely
   ☐ Sometimes
   ☐ Often
   ☐ Always

6. How often do the trainings you attend offer techniques or materials that are relevant for your community and the families you serve?
   ☐ Never
   ☐ Rarely
   ☐ Sometimes
   ☐ Often
   ☐ Always

7. How long were you on staff as a home visitor before you received training in [the model]?
   ☐ Less than 1 month
   ☐ 1 month
   ☐ 2 months
   ☐ 3 months
   ☐ 4-6 months
   ☐ Longer than 6 months

8. How long after you received your initial [model] training did you feel prepared to make home visits on your own?
   ☐ Right away
   ☐ Within 2 weeks
   ☐ Within 1 month
   ☐ Longer than 1 month
   ☐ I do not feel ready yet
   ☐ I haven't been trained yet

9. How important is each of the following in preparing and supporting you as a home visitor…

|  |  | Not at all important | Minimally important | Somewhat important | Very important | I haven't received this |
|---|---|---|---|---|---|---|
| 1 | Shadowing another home visitor | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | One-on-one time with my direct supervisor | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | [Model] training sessions | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | Receiving reflective supervision | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | Talking with other home visitors | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | Case conferencing | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | Watching videos of other home visitors | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | Debriefing with my co-workers | ☐ | ☐ | ☐ | ☐ | ☐ |
| 9 | Coursework/education in early childhood development or a related field | ☐ | ☐ | ☐ | ☐ | ☐ |
| 10 | Continuing education opportunities | ☐ | ☐ | ☐ | ☐ | ☐ |

10. What other strategies have been important in preparing and supporting you as a home visitor?
   _____

## J. SUPERVISION

We want to know how you feel about the amount of reflective supervision you receive.  Reflective supervision is the time you are able to spend with a supervisor or other provider exploring your thoughts, feelings, actions, and reactions when working with families.

1. How do you feel about the amount of one-on-one reflective supervision you receive?
   ☐ I'm getting too much
   ☐ I'm getting just the right amount
   ☐ I'm getting some but not enough
   ☐ I'm not getting any

2. How do you feel about the amount of group reflective supervision you receive (i.e., reflective supervision you receive with other home visitors)?
   - ☐ I'm getting too much
   - ☐ I'm getting just the right amount
   - ☐ I'm getting some but not enough
   - ☐ I'm not getting any

3. [SKIP if Question 1 AND Question 2 = I'm not getting any] Please answer the following questions about the person who provides you with reflective supervision. This may be your direct supervisor, someone else within your agency, or other provider. How often do you feel the following ways about the person who provides you with reflective supervision?

|  |  | Never | Rarely | Sometimes | Often | Always |
|---|---|---|---|---|---|---|
|  | **My reflective supervisor(s)…** |  |  |  |  |  |
| 1 | …and I have a trusting relationship. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | …and I have a regular supervision schedule. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | …questions encourage details about my practice to be shared and explored within the supervision session. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | …is engaged throughout the entire session. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | …is both a teacher and a guide. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | …makes me feel nurtured, safe, and supported during supervision. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | …shows me how to integrate emotion and reason into case analyses. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | …guidance improves my ability to be reflective. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 9 | …allows me time to come to my own solutions during supervision. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 10 | …explores my thoughts and feelings about the supervisory process itself. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 11 | …and I together set the agenda for supervision. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 12 | …thinks with me about how to improve my observation and listening skills. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 13 | …listens carefully for the emotional experiences that I am expressing. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 14 | …encourages me to talk about emotions I have felt while consulting and working with families. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 15 | …keeps families' and children's unique experiences in mind during supervision. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 16 | …wants to know how I feel about my consultation or practice experiences. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 17 | …helps me explore cultural considerations in my work. | ☐ | ☐ | ☐ | ☐ | ☐ |

4.  In the past 12 months, has there been a time when you did not have a supervisor or someone in a leadership position that you could go to for support in your job?

☐ No
☐ Yes, for less than 1 month
☐ Yes, for 1-3 months
☐ Yes, for 4-6 months
☐ Yes, for 7-9 months
☐ Yes, for 10 months or more
☐ Unsure

5.  In the past 12 months, has there been a time when you were unable to go to your supervisor or other provider for reflective supervision -- to explore your thoughts, feelings, actions, and reactions when working with families?

☐ No
☐ Yes, for less than 1 month
☐ Yes, for 1-3 months
☐ Yes, for 4-6 months
☐ Yes, for 7-9 months
☐ Yes, for 10 months or more
☐ Unsure

6.  In the past 12 months, has there been a time when you were unable to go to someone in your program with whom you had a trusting relationship to explore your thoughts, feelings, actions, and reactions when working with families?

☐ No
☐ Yes, for less than 1 month
☐ Yes, for 1-3 months
☐ Yes, for 4-6 months
☐ Yes, for 7-9 months
☐ Yes, for 10 months or more
☐ Unsure

7.  Since you began your position as a home visitor at your agency, how many direct supervisors have you had?
    Enter Number: _____

8.  The following topics may be discussed during one-on-one supervision. In order to meet your families' needs would you like to discuss the following topics <u>with your one-on-one supervisor</u> more, about the same, or less amount as you do now?

|   |   | More | About the same | Less | Unsure |
|---|---|---|---|---|---|
| 1 | **Progress of particular families,** including general updates and celebrating successes. | ☐ | ☐ | ☐ | ☐ |
| 2 | **Problem-solving for particular families.** This includes getting families connected to services, addressing challenging topics with families, strategies for motivating families, and supporting families through crises. | ☐ | ☐ | ☐ | ☐ |
| 3 | **Managing my caseload.** This includes the number of families on my caseload, enrolling new families into home visiting, scheduling home visits, and making the number of expected home visits. | ☐ | ☐ | ☐ | ☐ |
| 4 | **Building my skills to provide information and support to families**. This includes planning home visits, delivering the curriculum, learning how to model positive parenting and facilitate parent-child interaction, and accessing training and professional development. | ☐ | ☐ | ☐ | ☐ |
| 5 | **My thoughts, feelings, actions and reactions when working with families,** including any past trauma home visiting might bring up for me. | ☐ | ☐ | ☐ | ☐ |
| 6 | **My emotional wellbeing,** including managing stress and exhaustion, things happening in my personal life, and community events influencing morale. | ☐ | ☐ | ☐ | ☐ |
| 7 | **My professional development**, including discussing my professional development goals and actions that can be taken to achieve those goals. | ☐ | ☐ | ☐ | ☐ |
| 8 | **Working effectively with other team members,** including collaborating on activities, and roles and responsibilities of team members. | ☐ | ☐ | ☐ | ☐ |
| 9 | **Data collection and entry,** including tracking what data to collect and when, questions about forms or assessments, data entry, explaining data collection to families, completing forms in a timely manner. | ☐ | ☐ | ☐ | ☐ |
| 10 | **Policies and procedures and other administrative topics.** This includes following agency or program policies and procedures, changes to policies and procedures, completing administrative trainings and forms, time and leave reporting, and performance reviews. | ☐ | ☐ | ☐ | ☐ |

9.  How helpful is the support you get from your direct supervisor during one-on-one supervision in the following areas:

| | | Not at all helpful | A little helpful | Somewhat helpful | Very helpful |
|---|---|---|---|---|---|
| 1 | **Tracking progress of particular families,** including general updates and celebrating successes. | ☐ | ☐ | ☐ | ☐ |
| 2 | **Problem-solving for particular families.** This includes getting families connected to services, addressing challenging topics with families, strategies for motivating families, and supporting families through crises. | ☐ | ☐ | ☐ | ☐ |
| 3 | **Managing my caseload.** This includes balancing work with the number of families on my caseload, enrolling new families into home visiting, scheduling home visits, and making the number of expected home visits. | ☐ | ☐ | ☐ | ☐ |
| 4 | **Building my skills to provide information and support to families**. This includes planning home visits, delivering the curriculum, learning how to model positive parenting and facilitate parent-child interaction, and accessing training and professional development. | ☐ | ☐ | ☐ | ☐ |
| 5 | **Processing my thoughts, feelings, actions and reactions when working with families,** including any past trauma home visiting might bring up for me. | ☐ | ☐ | ☐ | ☐ |
| 6 | **My emotional wellbeing,** including managing stress and exhaustion, things happening in my personal life, and community events influencing morale. | ☐ | ☐ | ☐ | ☐ |
| 7 | **My professional development**, including discussing my professional development goals and actions that can be taken to achieve those goals. | ☐ | ☐ | ☐ | ☐ |
| 8 | **Working effectively with other team members,** including collaborating on activities, and roles and responsibilities of team members. | ☐ | ☐ | ☐ | ☐ |
| 9 | **Data collection and entry,** including tracking what data to collect and when, questions about forms or assessments, data entry, explaining data collection to families, completing forms in a timely manner. | ☐ | ☐ | ☐ | ☐ |
| 10 | **Policies and procedures and other administrative topics.** This includes following agency or program policies and procedures, changes to policies and procedures, completing administrative trainings and forms, time and leave reporting, and performance reviews. | ☐ | ☐ | ☐ | ☐ |

10. How often do you rely <u>on other home visitors</u> in your program for support in the following areas:

|   | | Never | Rarely | Sometimes | Often | Always |
|---|---|---|---|---|---|---|
| 1 | **Tracking progress of particular families,** including general updates and celebrating successes. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2 | **Problem-solving for particular families.** This includes getting families connected to services, addressing challenging topics with families, strategies for motivating families, and supporting families through crises. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3 | **Managing my caseload.** This includes balancing work with the number of families on my caseload, enrolling new families into home visiting, scheduling home visits, and making the number of expected home visits. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4 | **Building my skills to provide information and support to families**. This includes planning home visits, delivering the curriculum, learning how to model positive parenting and facilitate parent-child interaction, and accessing training and professional development. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5 | **Processing my thoughts, feelings, actions and reactions when working with families,** including any past trauma home visiting might bring up for me. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 6 | **My emotional wellbeing,** including managing stress and exhaustion, things happening in my personal life, and community events influencing morale. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 7 | **My professional development**, including discussing my professional development goals and actions that can be taken to achieve those goals. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 8 | **Working effectively with other team members,** including collaborating on activities, and roles and responsibilities of team members. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 9 | **Data collection and entry,** including tracking what data to collect and when, questions about forms or assessments, data entry, explaining data collection to families, completing forms in a timely manner. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 10 | **Policies and procedures and other administrative topics.** This includes following agency or program policies and procedures, changes to policies and procedures, completing administrative trainings and forms, time and leave reporting, and performance reviews. | ☐ | ☐ | ☐ | ☐ | ☐ |

11. How helpful is the support you get <u>from other home visitors</u> in the following areas:

| | | Not at all helpful | A little helpful | Somewhat helpful | Very helpful |
|---|---|---|---|---|---|
| 1 | **Tracking progress of particular caregivers,** including general updates and celebrating successes. | ☐ | ☐ | ☐ | ☐ |
| 2 | **Problem-solving for particular caregivers.** This includes getting families connected to services, addressing challenging topic with families, strategies for motivating families, and supporting families through crises. | ☐ | ☐ | ☐ | ☐ |
| 3 | **Managing my caseload.** This includes balancing work with the number of families on my caseload, enrolling new families into home visiting, scheduling home visits, and making the number of expected home visits. | ☐ | ☐ | ☐ | ☐ |
| 4 | **Building my skills to provide information and support to families**. This includes planning home visits, delivering the curriculum, learning how to model positive parenting and facilitate parent-child interaction, and accessing training and professional development. | ☐ | ☐ | ☐ | ☐ |
| 5 | **Processing my thoughts, feelings, actions and reactions when working with families,** including any past trauma home visiting might bring up for me. | ☐ | ☐ | ☐ | ☐ |
| 6 | **My emotional wellbeing,** including managing stress and exhaustion, things happening in my personal life, and community events influencing morale. | ☐ | ☐ | ☐ | ☐ |
| 7 | **My professional development**, including discussing my professional development goals and actions that can be taken to achieve those goals. | ☐ | ☐ | ☐ | ☐ |
| 8 | **Working effectively with other team members,** including collaborating on activities, and roles and responsibilities of team members. | ☐ | ☐ | ☐ | ☐ |
| 9 | **Data collection and entry,** including tracking what data to collect and when, questions about forms or assessments, data entry, explaining data collection to families, completing forms in a timely manner. | ☐ | ☐ | ☐ | ☐ |
| 10 | **Policies and procedures and other administrative topics.** This includes following agency or program policies and procedures, changes to policies and procedures, completing administrative trainings and forms, time and leave reporting, and performance reviews. | ☐ | ☐ | ☐ | ☐ |

## K. ORGANIZATIONAL CULTURE AND CLIMATE

1. The following questions ask you to think about how your home visiting team does its work. We want to know how your team works together, takes in information, and makes decisions about the team's approach to home visiting. When answering questions about your team, please think about the staff that make up your home visiting program. This would include other home visitors, program coordinators/managers, supervisors, evaluators, data managers and anyone else that might work closely with your program. How much do you agree or disagree with the following statements?

| | | Strongly agree | Agree | Disagree | Strongly disagree |
|---|---|---|---|---|---|
| 1 | Our team gets all the information it needs to do our work and plan our schedules. | ☐ | ☐ | ☐ | ☐ |
| 2 | It is easy for our team to obtain expert assistance when something comes up that we don't know how to handle. | ☐ | ☐ | ☐ | ☐ |
| 3 | Our team is kept in the dark about decisions that impact day-to-day work and what may happen with the program and its staff in the future. | ☐ | ☐ | ☐ | ☐ |
| 4 | Our team lacks access to useful training on the job. | ☐ | ☐ | ☐ | ☐ |
| 5 | Excellent work pays off in this organization. | ☐ | ☐ | ☐ | ☐ |
| 6 | It is clear what this team is supposed to accomplish. | ☐ | ☐ | ☐ | ☐ |
| 7 | Our team spends time making sure every team member understands their role and responsibilities. | ☐ | ☐ | ☐ | ☐ |
| 8 | Our team has invested plenty of time to clarify our goals. | ☐ | ☐ | ☐ | ☐ |
| 9 | If you make a mistake on our team, it is often held against you. | ☐ | ☐ | ☐ | ☐ |
| 10 | Members of our team are able to bring up problems and tough issues. | ☐ | ☐ | ☐ | ☐ |
| 11 | People on our team are expected to conform to the group. | ☐ | ☐ | ☐ | ☐ |
| 12 | It is safe to try something new on our team. | ☐ | ☐ | ☐ | ☐ |
| 13 | It is difficult to ask other members of our team for help. | ☐ | ☐ | ☐ | ☐ |
| 14 | No one on our team would deliberately act in a way that undermines my efforts. | ☐ | ☐ | ☐ | ☐ |
| 15 | Working with members of our team, my unique skills and talents are valued and utilized. | ☐ | ☐ | ☐ | ☐ |
| 16 | Achieving our team's goals is well within our reach. | ☐ | ☐ | ☐ | ☐ |
| 17 | Our team can complete work as assigned without being required to put in unreasonable time or effort. | ☐ | ☐ | ☐ | ☐ |

| | | Strongly agree | Agree | Disagree | Strongly disagree |
|---|---|---|---|---|---|
| 18 | With focus and effort, our team can do anything we set out to accomplish. | ☐ | ☐ | ☐ | ☐ |
| 19 | Most people in our team can solve the problems that come up in our work. | ☐ | ☐ | ☐ | ☐ |
| 20 | All members of our team have more than enough training and experience for the kind of work they have to do. | ☐ | ☐ | ☐ | ☐ |
| 21 | Certain individuals in our team lack the special skills needed for good team work. | ☐ | ☐ | ☐ | ☐ |
| 22 | We regularly take time to figure out ways to improve our team's work processes. | ☐ | ☐ | ☐ | ☐ |
| 23 | Our team tends to handle differences of opinion privately, rather than addressing them directly as a group. | ☐ | ☐ | ☐ | ☐ |
| 24 | Our members go out and get all the information they possibly can from others-such as families, community members, and other program partners. | ☐ | ☐ | ☐ | ☐ |
| 25 | Our team frequently uses information and data that leads us to make important changes. | ☐ | ☐ | ☐ | ☐ |
| 26 | In our team, someone always makes sure that we stop to reflect on the team's work process. | ☐ | ☐ | ☐ | ☐ |
| 27 | People on our team often speak up to test assumptions we might have. | ☐ | ☐ | ☐ | ☐ |
| 28 | People on our team are encouraged to think outside the box. | ☐ | ☐ | ☐ | ☐ |
| 29 | We invite people from outside our team to present information or have discussions with us. | ☐ | ☐ | ☐ | ☐ |
| 30 | Our team uses data to see if our processes are leading to the results we want. | ☐ | ☐ | ☐ | ☐ |
| 31 | Members of our team are encouraged to try new strategies to see if they will work. | ☐ | ☐ | ☐ | ☐ |
| 32 | Members of our team support each other as we work to master new skills. | ☐ | ☐ | ☐ | ☐ |
| 33 | The quality of work provided by our team is improving over time. | ☐ | ☐ | ☐ | ☐ |

2. Tribal home visiting programs have a lot of different leadership structures. For the next few questions, think about the person in <u>your</u> home visiting program who serves as your team leader.  How much do you agree or disagree with the following statements?

|  |  | Strongly agree | Agree | Disagree | Strongly disagree |
|---|---|---|---|---|---|
| 1 | Our team leader initiates meetings to discuss the team's progress. | ☐ | ☐ | ☐ | ☐ |
| 2 | Our team leader is available for consultation on problems. | ☐ | ☐ | ☐ | ☐ |
| 3 | Our team leader is engaged in our team's day-to-day work. | ☐ | ☐ | ☐ | ☐ |
| 4 | Our team leader manages crises in a calm and dependable way. | ☐ | ☐ | ☐ | ☐ |
| 5 | Our team leader helps us get through challenges we face in our work. | ☐ | ☐ | ☐ | ☐ |
| 6 | Our team leader handles personnel issues thoughtfully. | ☐ | ☐ | ☐ | ☐ |
| 7 | Our team leader would go to bat for us. | ☐ | ☐ | ☐ | ☐ |
| 8 | Our team leader has enough training and experience to be an effective leader. | ☐ | ☐ | ☐ | ☐ |
| 9 | Our team leader treats all team members fairly. | ☐ | ☐ | ☐ | ☐ |
| 10 | Our team leader doesn't really understand what our team needs to do its job well. | ☐ | ☐ | ☐ | ☐ |

## L. CONNECTION TO COMMUNITY SERVED

1.  Do you live in the same community or neighborhoods as the families you serve?
    - ☐ Yes → GO TO Question 1a
    - ☐ No → SKIP TO Question 1b

    1a.  [If Question 1 = Yes] In total, how many years have you lived in the same community or neighborhoods as the families you serve?
    - ☐ Less than 1 year
    - ☐ 1-2 years
    - ☐ 3-5 years
    - ☐ 6-10 years
    - ☐ More than 10 years

    1b.  [If Question 1 = No] If you ever previously lived in the same community or neighborhoods as the families you serve, how long did you live there?
    - ☐ I never lived there
    - ☐ Less than 1 year
    - ☐ 1-2 years
    - ☐ 3-5 years
    - ☐ 6-10 years
    - ☐ More than 10 years

2.  Do you consider yourself a member of the same tribal or urban Indian community as the families you serve?
    - ☐ Yes
    - ☐ No
    - ☐ Somewhat

3.  In general, do you feel as though you and the families you serve share a similar cultural background?
    - ☐ Yes, with most families
    - ☐ Yes, with some families
    - ☐ Yes, with a few families
    - ☐ No

## M. DEMOGRAPHICS

1. What is your Ethnicity?
   - ☐ Hispanic or Latino
   - ☐ Not Hispanic or Latino

2. What is your Race? CHECK ALL THAT APPLY
   - ☐ American Indian or Alaska Native   → GO TO Question 2a
   - ☐ Asian   → SKIP TO Question 3
   - ☐ Black or African American   → SKIP TO Question 3
   - ☐ Native Hawaiian or Other Pacific Islander   → SKIP TO Question 3
   - ☐ White   → SKIP TO Question 3

   2a. [If Question 2 = American Indian or Alaska Native] What is your tribal affiliation and/or identity?
   _____

3. What is your age?
   - ☐ 25 and under
   - ☐ 26-29
   - ☐ 30-39
   - ☐ 40-49
   - ☐ 50-59
   - ☐ 60 or older

**[NEXT SCREEN]**

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

# Please click NEXT to exit the survey.