**State-Level Collaboration Phase II Interview Questions**

**(1) Demographics of Participants**

Agency type:

* Vocational rehabilitation (VR)
* Juvenile justice
* Adult Justice/Department of Corrections
* Child Welfare
* Title I WIOA-funded Workforce
* Title II WIOA Adult Education
* Education
	+ K-12
	+ Higher Education
	+ Career Technical Education
	+ Other (Please describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Social security
* Developmental disability
* Mental health
* Other (Please describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total years of experience in the field: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total years of experience in your agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your role at your current agency:

* Supervisory
* Direct service provider
* Both
* Other (Please describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe the setting in which you or your agency provides services (check all that apply):

 Urban

 Suburban

 Rural

Gender:

* Female
* Male
* Non-binary
* Prefer to self-describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to say

Do you consider yourself to be Hispanic/Latino?

* Yes
* No
* Prefer to self-describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to say

Race – check all that apply:

* African American
* American Indian/Alaskan Native
* Asian
* Native Hawaiian/Pacific Islander
* White
* Prefer to self-describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to say

Do you have a disability?

* Yes
* No
* Prefer to self-describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to say
1. **Protocol for Interagency Collaboration in Youth Transition Interviews**

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| **Q# 1-11****For Agency Personnel in *Supervisory* Role** | **TIME 1 hour** |
| **Interview Prompts** | **Probes and Follow-ups** |
| *Current Work and Practices Theme*1. Does your agency participate in interagency collaboration? What does that look like?
2. Prior to the COVID-19 pandemic, to what extent did your agency’s policies and practices reflect the goals and objectives of interagency collaboration?
3. Since the start of the COVID-19 pandemic, how have your agency’s policies and practices encouraged interagency coordination of youth transition services? How have your agency’s policies and practices inhibited interagency coordination of youth transition services?
4. To what extent do your agency’s staff training efforts include interagency coordination? Have there been updates to training efforts to help staff collaborate during the COVID-19 pandemic?
5. How has the COVID-19 pandemic affected interagency collaborations in serving transition-age youth with disabilities?
6. With regard to youth with disabilities receiving services from multiple agencies, in what ways are you able to collaborate with your colleagues at other agencies to best serve these populations? [Possible follow-up] In the cases where the family is also receiving services, in what ways are you able to collaborate? Do you currently, or have you ever collaborated with other agencies/partners in providing services to youth and families? Can you provide examples? Can you explain how this collaboration was initiated (e.g., by you, the other agency, or another entity)?
7. With regard to youth receiving services from multiple agencies, do you have formal interagency agreements in place for providing service coordination to meet the needs of these populations (e.g., memoranda of understanding, memoranda of agreement)? [Possible follow-ups] With which other agencies do you have formal frameworks (e.g., standing committees) or agreements in place? Which other agencies do you not have a formal framework or agreement in place but wish you did? What capabilities would they add to your services? Explain how formal agreements facilitate coordination of tasks more readily achievable.
8. With regard to youth and families receiving services from multiple agencies, how do you share resources and information with other agencies to support service coordination and service delivery efforts? [Possible follow-ups, time permitting] Can you provide examples of resource and information sharing practices? How frequently do you communicate with colleagues at other agencies serving transition-age youth and young adults with disabilities, or their families? [Possible follow-ups] How would you define “frequent” communication? Daily? Weekly? Monthly? Yearly? Can you describe what that communication looks like (e.g., email, phone, virtual, in person, regularly scheduled meetings)? What would you find helpful for improving communication or collaboration with these services? What value would this collaboration add? Describe any shared decision making mechanisms you may have with any outside agencies in your state.

*Service Improvement Theme*1. How successful do you feel your existing interagency collaborations are? How can service coordination across systems be improved to better meet the transition needs of youth and young adults with disabilities?
2. What prevents full collaboration of service across systems in your state? What are some of the barriers? What mechanisms are in place to address these barriers? Do you feel efforts to create MOUs or data sharing agreements are valuable contributions? [Follow-up] If yes or no, why?
3. What, if any, successful innovations in interagency coordination have been utilized in your state? How recently were these implemented? What changes, if any, have these innovations brought about?

\*Some questions adapted from Friedman, S. R., Reynolds, J., Quan, M. A., Call, S., Crusto, C. A., & Kaufman, J. S. (2007). Measuring changes in interagency collaboration: An examination of Bridgeport Safe Start Initiative. *Evaluation and Program Planning 30*, pp. 294-306. | * Please tell me more…
* Please give me an example…
* I’m not quite sure I understood…Could you tell me about that some more?
* I’m not certain what you mean by…
* Could you give me some examples?
 |

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays an Office of Management and Budget (OMB) control number. The valid OMB Control Number for this information collection is xxxx-xxxx. The time required to participate in the interview is estimated to average 90 minutes, including the time to review instructions, search existing data resources, gather the data needed and complete and review the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to US Department of Labor, Office of Disability Employment Policy, 200 Constitution Ave., N.W. Washington, DC 20210 and reference the OMB Control Number xxxx-xxxx.

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The following statement is made in accordance with the Privacy Act of 1974 (5. U. S. C. 552a). Information collected will be handled and stored in compliance with the Freedom of Information Act and the Privacy Act of 1974, as amended (5 U.S.C. 552a). Furnishing the data requested is voluntary.

We will use the data you provide for the CAPE-Youth Research Project, funded by The United States Department of Labor, Office of Disability Employment Policy. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 (Title 5 of Public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent. Per the Federal Cybersecurity Enhancement Act of 2015, Federal information systems are protected from malicious activities through cybersecurity screening of transmitted data.