

OMB No.: 0970-0402

Expiration Date: 11/30/2021



**Mother and Infant Home Visiting Program  
Evaluation**

**MIHOPE-K**

**DIRECT ASSESSMENTS OF CAREGIVERS:  
VISIT PROTOCOL**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0970-0402. The time required to complete this information collection is estimated to average 10 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

*September 2021*

Client MPR ID: |\_\_|\_|\_|\_|\_|\_|\_|\_|\_|

Date of interview: |\_\_|\_|\_| / |\_\_|\_|\_| / |\_\_|\_|\_|\_|\_|\_|\_|\_|\_|  
 Month Day Year

FIELD INTERVIEWER ID: |\_\_|\_|\_|\_|\_|\_|\_|\_|\_|

**Note:** At this point respondents will have already heard the OMB introduction language. See SSA Attachment 2 – MIHOPE – K Direct assessments of children for this language.



IN-PERSON VISIT

SAY TO THE CAREGIVER: **We're almost done, but I have a quick memory activity for us to do. I will need your full attention during this activity, but it is quick. (ANSWER ANY QUESTIONS.)** SAY TO CHILD: **Thank you for playing these games with me. I'm going to play a quick game with your (mom/caregiver). I have (a sticker sheet/some crayons) for you to play with while I do this game with her. Do you want to play with them now? You can also keep them after I leave.**

**MIHOPE DIGIT SPAN ASSESSMENT**

**ADMINISTER BACKWARD DIGIT SPAN**

Items in this section are from the backward Digit Span assessment.

SAY TO CAREGIVER: **Great! We are all done with this activity. Before we finish, I have a couple of questions for you.**

**P11. [CHILD] is getting pretty big. Even so, does [he/she] ever want you to just sit and hold [him/her]?**

- YES..... 1 P11a
- NO..... 0
- DON'T KNOW..... D
- REFUSED..... R

P11=YES

**P11a. When this occurs, for about how many minutes do you just sit and hold [him/her] in a typical day?**

|\_|\_| MINUTES A DAY  
(1-180)

- DON'T KNOW..... D
- REFUSED..... R

SAY TO CAREGIVER: **Great! We are all done with the activities.**

**L. CLOSING**

L1. SAY TO MOTHER/CAREGIVER:

**Thank you so much! Those were all of the activities that I needed to do with you and [CHILD]. I very much appreciate your time and willingness to complete this portion of the study. This book is for [CHILD] TO KEEP.**

# VIRTUAL VISIT

## **BACKWARD DIGIT SPAN (CAREGIVER)**

### CAREGIVER'S SCREEN DISPLAY

- INTERVIEWER SHARE SCREEN OFF; NO STIMULI FOR CAREGIVER TO VIEW
- VIEW OF INTERVIEWER SHOULD BE MAXIMIZED/FULL SCREEN
- CAREGIVER SELF-VIEW: OFF

### **ASSESSOR INTERVIEWER SCREEN:**

ALLOW CHILD TO CONTINUE PLAYING WITH TOYS IN THE 3 BAGS TO OCCUPY HIM/HERSELF DURING THIS TASK WITH CAREGIVER.

SAY TO THE MOTHER/CAREGIVER: **We're almost done, but I have a short memory activity for us to do. I will need your full attention during this activity, but it is quick.**

Items in this section are from the Digit Span assessment.

### ADMINISTER BACKWARD DIGIT SPAN

IF THERE IS A LOT OF BACKGROUND NOISE, SAY: **This activity works best if you are wearing headphones. Please connect the headphones to the tablet. The jack is on the top left side of the tablet.**

**Are you ready to practice?** WAIT FOR CAREGIVER'S RESPONSE. **Great! Listen carefully.**

### PRACTICE TRIALS

### TEST TRIALS

SAY TO CAREGIVER: **Listen closely. Ready? Okay.**

SAY TO CAREGIVER: **Great! We are all done with this activity. Before we finish, I have a couple of questions for you.**

**P11. [CHILD] is getting pretty big. Even so, does [he/she] ever want you to just sit and hold [him/her]?**

- YES.....1 P11a
- NO.....0
- DON'T KNOW.....D
- REFUSED.....R

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**P11a. When this occurs, for about how many minutes do you just sit and hold [him/her] in a typical day?**

|\_|\_| MINUTES A DAY

(1-180)

- DON'T KNOW.....D
- REFUSED.....R

SAY TO CAREGIVER: **Great! We are all done with the activities.**

## **L. CLOSING**

L1. SAY TO MOTHER/CAREGIVER:

**Thank you so much! Those were all of the activities that I needed to do with you and [CHILD]. I very much appreciate your time and willingness to complete this portion of the study. Please grab the envelope marked [FILL] that we included in your bag of materials. This is a gift for [CHILD] to keep.**