**R3-Impact Child Welfare Lead Staff Topic Guide**

**Introduction:** We are from the research firm [Abt Associates/Child Trends] and we are conducting the [STUDY NAME] evaluation. The study is overseen by the Office of Planning, Research, and Evaluation (OPRE), in collaboration with the Children’s Bureau, in the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS). As part of the evaluation, we are conducting an implementation study to learn how counties implementing [PMP or START] are approaching their work.

As part of this study, we are talking with child welfare staff to learn more about how [PMP/START] is being delivered in your community. During our conversation, we will ask questions to understand more about your community, your agency / organization, and how [PMP/START] is being implemented in your community, including partners involved in implementing the program, factors influencing implementation of [PMP/START], and your thoughts about how well the program is working.

Before beginning our discussion, we want to thank you for agreeing to talk with us today. We know you are busy and we appreciate the valuable time you are spending with us today. The interview will take about 60 minutes. Your participation is voluntary, and there are no penalties for choosing not to take part in the interview. You can refuse to answer any questions or stop the interview at any time. Our aim is to learn from your insights and experience. There are no right or wrong answers. Your answers will be kept private to the extent permitted by law. The information you provide will not be shared with other staff at your agency or organization. Your name will not be listed in any published reports, and comments will not be attributed to you. Instead, your answers will be combined with answers provided by other people in your same role that we interview across the country for this study. However, because of the relatively small number of agencies/organizations participating in the study, there is a possibility that a response could be correctly attributed to you. Your data will only be used for research purposes. *The legal authority for this project is 42 U.S.C. § 1310a and Public Law 115-271. For System of Records Notice (SORN) information, please see the SORN number 09-80-0361, “OPRE Research and Evaluation Project Records.*

We would like to record this discussion with a digital recorder so we can listen to it later when we write up our notes to make sure we captured everything accurately. No one besides our research team and the transcription vendor will listen to the recording. If you want to say anything that you don’t want recorded, please let us know and we will be glad to pause the recorder. Do you have any objections to being part of this interview or to us recording our discussion?

*This collection of information is voluntary and will be used to understand programs that provide peer mentoring for parents involved in the child welfare system. Public reporting burden for this collection of information is estimated to average 60 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 #: XXXX, Exp: XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Kimberly Francis (Abt Associates); kimberly\_francis@abtassoc.com.*

Do you have any questions before we begin?

1. **Respondent Information**
* Name, title, organization/affiliation, length of involvement with the organization and with the program
* Overall role/job responsibilities
1. **Local Context (CFIR Domain: Outer Setting)**
* **Local political, economic, and geographic conditions**
	+ Barriers to family stability
		- Transportation to/from neighborhoods where families live
			* To areas where jobs are available
			* To schools
		- Housing affordability and availability
		- Availability of jobs suitable for people in recovery
		- Availability of employers providing support to people in recovery/ “Recovery-Oriented Workplaces”
		- Policy context, such as occupational licensing restrictions
	+ Families most / least affected by these barriers
		- Systemic bias in experience of barriers
	+ Programs / resources in the community to address these barriers
	+ Recent local policy or community efforts to remove these barriers, such as fair chance hiring
	+ Facilitators of family stability
		- Social supports
		- Community sense of collective efficacy
		- Differential access to facilitators
* **Local substance use disorder conditions**
	+ Prior grants and initiatives to address high rates of SUD for target population
	+ History of inter-agency efforts to address high rates of SUD for target population
* **Local child welfare system conditions**
	+ Trends in removals and reunifications, including shifts during/after COVID-19 lockdowns
	+ Policy context and shifts, e.g. status of Family First implementation, state-specific ICWA laws, other “critical incidents” in the child welfare system
	+ Fluctuations in funding and how they have affected service delivery
	+ How intervention aligns with broader CW system strategy
1. **Agency Background (CFIR Domain: Inner Setting)**

*[Site visitors: Pre-populate with information collected through monitoring calls, materials sent ahead of time (such as an org chart), state/county websites, etc. Confirm and/or obtain any missing information.]*

* District/branch leadership (including turnover since start of study enrollment)
* Any prior experience offering peer support services.
* Stability of system funding
* Agency’s total number of paid staff, including number of staff and percent FTE
* Degree to which racial/ethnic composition of staff mirrors community demographics
	+ Workforce trends and challenges
		- Turnover
		- Shortages
		- Burnout
		- Effect of these trends on service delivery
* Agency’s approach to promoting racial equity, including goals and specific strategies such as staff training and hiring, use of data, etc.
* Agency’s approach to addressing parental substance use, including through staff training
1. **Program Background (CFIR Domains: Process of Implementation, Individuals)**
* Prior knowledge of recovery coaching interventions
* How and when they learned of PMP/START intervention specifically
* Concerns about implementing START/PMP and how these concerns have been addressed
	+ - Concerns about working with mentors
		- Concerns about working with provider agency (for PMP)
		- Concerns about caseworker burden
		- Concerns about alignment between intervention and agency strategy and culture
* Reasons for interest in implementing START/PMP
* How START/PMP aligns with broader system goals, including around racial equity
* Leadership support for implementing START/PMP
* CW staff involved in deciding to implement START/PMP
* [START only]: How, if at all, child welfare agency has tailored START to adapt for local context
	+ How, if at all, the agency and START/PMP engage in continuous quality improvement activities, including approaches to address disproportionality in CW system involvement
* Technical assistance and training received on START/PMP (including feedback on the quality of technical assistance and training), including at program start and ongoing support / TA
1. **Program Structure (CFIR Domain: Innovation, Process of Implementation)**
* Management structure
	+ - Who in the child welfare system has authority over START/PMP implementation
		- Number of child welfare system staff involved in PMP/START delivery and positions
		- Frequency, staffing, and content of training and information sessions for staff on the intervention
		- Presence and role of mentors in the child welfare branch offices
		- Reception of mentors and others with lived experience by caseworkers
* Partnerships
	+ - Key partners involved in implementation and their roles/responsibilities
			* Provider agency (for PMP)
			* Treatment providers
			* Other community partners
		- Degree to which partners offer culturally-specific services
		- Involvement of advisory boards, including parents with lived experience with child welfare in decision-making, policies, practice
		- Prior existing relationships with these partners and how relationship has evolved during implementation of PMP/START
		- Staff within child welfare system responsible for coordination with partners
		- Schedule and format for partner coordination meetings
		- Process for referrals to/from partners
			* Process for referrals of parents to other agencies for services (including to treatment and to services similar to the intervention)
		- Process and frequency of any data exchange about parents between partners to ensure coordination of services
		- Partnership challenges and how they have been addressed
		- Perception of benefits of partnerships, including how adopting PMP/START has changed caseworker practices, if at all.
			* Reducing biases and stigma
			* Improving caseworker practices and attitudes
			* Reducing caseworker burden
1. **Operational Challenges and Successes**
	* + Ways PMP/START has met/exceeded or fallen short of its goals
		+ Challenges PMP/START has encountered and how they were overcome
		+ Areas for improvement; plans for changes and modifications
		+ Advice for local child welfare system staff interested in similar interventions