

Appendix A

Community organization outreach materials

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Appendix A.1

Community organization invitation email

A.1 Community organization invitation email

Dear [NAME],

[IF PILOT STUDY ORGANIZATION: I hope you are well. Thank you again for your help during the HBCC-NSAC Toolkit Pilot Study! The pilot study results helped us make important improvements to the toolkit. I'm writing to ask for your help because we are conducting a new HBCC-NSAC Toolkit Study to test the English version of the improved provider questionnaire. This new study will help us understand how the provider questionnaire compares to other available HBCC measures.] [IF HBCC PROVIDER EXPERIENCES STUDY ORGANIZATION: Thank you again for your support on the Home-Based Child Care Provider Experiences (HBCC P&E) Study! I'm writing to ask for your help on a new study Mathematica is conducting to test a toolkit that home-based providers can use to reflect on their caregiving strengths and areas for growth called the Home-Based Child Care Toolkit for Nurturing School-Age Children (HBCC-NSAC Toolkit). This new study will help us understand how the HBCC-NSAC Toolkit's provider questionnaire compares to other measures available to support quality improvement among HBCC providers.]

[IF NEW ORGANIZATION: I am writing to ask for your help with a research study of home-based child care (HBCC) providers. This study is being conducted by Mathematica, an independent research organization.

As part of the Home-Based Child Care Supply and Quality project, conducted for the Office of Planning, Research, and Evaluation within the Administration for Children and Families at the U.S. Department of Health & Human Services, we've learned that many measures used with home-based providers (that is, people who care for children in a home), were not created with home-based providers in mind. So, we developed the Home-Based Child Care Toolkit for Nurturing School-Age Children (HBCC-NSAC Toolkit). Home-based providers can use the HBCC-NSAC Toolkit to reflect on their caregiving strengths and areas for growth. This new study will help us understand how the HBCC-NSAC Toolkit's provider questionnaire compares to other available HBCC measures.]

We hope you can help us find English-speaking home-based providers, including family child care providers and family, friend, and neighbor care providers, to participate in the study. We will ask the home-based providers to fill out a provider questionnaire and invite families of school-age children in their care to complete a short survey. [IF OBSERVATION: We will also ask providers if the study team can observe them caring for children in their home.] We will offer gift cards to providers and families that participate.

If you think [ORGANIZATION] could help refer providers for this study, please respond to this email with date/times in the next week you or a member of your team are available to discuss how your organization can help. [NAME(S)] from Mathematica (copied) will be in touch to set up the call.

Please do not include any names of providers in the email.

Thank you in advance for your help.

Best,

[NAME] for the HBCC-NSAC Toolkit Study team

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Appendix A.2

Community organization follow up email

A.2 Community organization follow up email

[IF COMMUNITY ORGANIZATION CONTACT REPLIES TO EMAIL REQUEST IN A.1 (INDICATING THEY CAN HELP IDENTIFY PROVIDERS) WITH DATE/TIMES:

Thank you for your reply! I've sent you a WebEx (web-conference) invitation for [DATE/TIME] to talk about the HBCC-NSAC Toolkit Study and how you could help us identify home-based providers who may be interested. I can also answer any questions you have. You are welcome to forward the invite to other staff at your organization that could help identify those who might be interested in trying out the HBCC-NSAC Toolkit provider questionnaire.

[IF COMMUNITY ORGANIZATION CONTACT DOES NOT REPLY TO EMAIL REQUEST IN A.1 (INDICATING THEY CAN HELP IDENTIFY PROVIDERS) OR REPLIES WITHOUT DATES/TIMES:

I would like to schedule a time to talk about the HBCC-NSAC Toolkit Study and how your organization could help us identify home-based providers who may be interested. I can also answer any questions you have. You are welcome to forward the invite to other staff at your organization that could help identify those who might be interested in trying out the HBCC-NSAC Toolkit provider questionnaire.

Are you available to talk on [DATE TIME]? If not, please let me know two days/times when you can meet [this/next] week?]

Please let me know if you have any questions.

Sincerely,

[NAME] for the HBCC-NSAC Toolkit Study team

[PHONE NUMBER]

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Appendix A.3

Community organization roles email

A.3 Community organization roles email

LIAISON WILL SEND THIS EMAIL TO ORGANIZATIONS THAT WERE NOT ABLE TO COME TO A DECISION ABOUT SITE COORDINATOR ROLE DURING ONBOARDING CALL TO FACILITATE DECISION-MAKING

Hi [NAME],

The HBCC-NSAC Toolkit study team aims to partner with community organizations that can help identify home-based providers who might participate in the study. There are two main ways that community organizations can help support this study:

- 1) Identify a full site coordinator, which involves sharing provider contact information with us, distributing our study flyer and helping to enlist providers to participate, distributing and collecting materials as needed, and following up with providers as needed,

OR

- 2) Identify a partial site coordinator, which involves sharing providers’ contact information with us and distributing our study flyer.

Site coordinator

If you are willing, we will ask you to designate a staff member at your community organization to act as a site coordinator and help us recruit home-based providers affiliated with your organization.

Duties	Full Site Coordinator	Partial Site Coordinator
Distribute our study flyer with providers affiliated with your organization.	X	X
Identify eligible home-based providers who might be interested in participating and share their contact information with us via a phone call or our secure Box site.	X	X
Identify potential meetings or events (in-person or virtual) at your organization where someone from your organization or the study team could share information about the study (for example, an event where someone from your organization could distribute flyers and paper versions of the Toolkit).	X	
Follow up with home-based providers who agree to participate (for example, in instances where a provider does not answer recruiter calls or does not complete the Toolkit on time).	X	
Honorarium amount:	\$250	\$100

If you prefer to not identify a site coordinator but still would like to support the HBCC-NSAC Toolkit Study, we kindly ask that you share our study flyers with the home-based providers affiliated with your organization.

Please confirm your organization's preferred role and/or the staff member who will be the site coordinator, and we will follow up with them. If your organization's capacity to fulfill the role changes over time, we ask that you please let us know.

Please let me know if you have additional questions.

Thank you,

[NAME]

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Appendix A.4

Community organization onboarding call follow up email

A.4 Community organization onboarding call follow up email

LIAISON WILL TAILOR THIS EMAIL BASED ON FOLLOW-UP/REMINDER TOPICS SENT OVER A VARIETY OF MODES (AS DISCUSSED DURING ONBOARDING CALL)

SUBJECT: Thank you for chatting with me about the HBCC-NSAC Toolkit Study

ATTACHMENTS: PROVIDER FLYER, USER GUIDE (IF APPLICABLE)

Hi [NAME]

Thank you so much for meeting with me earlier and your willingness to help us identify home-based child care (HBCC) providers who might like to participate in the Home-Based Child Care Toolkit for Nurturing School-Age Children (HBCC-NSAC) Study!

Below are the next steps that we discussed on our call. For your reference, I also included a summary of key points from the call toward the end of the email.

Next Steps

[IF SITE COORDINATOR ROLE ACCEPTED:

Site coordinator

As discussed, [NAME/you/someone from your organization] will serve as a **[full/partial] site coordinator**. In this role, we ask for help with:

- Distributing our study flyer with providers affiliated with your organization.
- Identifying home-based providers who might be interested in participating and sharing their contact information with us via a phone call or our secure Box site (more information under the “Box” section).]
- [FULL ONLY: Identifying potential meetings or events (in-person or virtual) where someone from your organization or the study team could share information about the study (for example, an event where someone from your organization could distribute flyers and paper versions of the toolkit).]
- [FULL ONLY: Following up with home-based providers who agree to participate (for example, in instances where a provider does not answer study team calls or does not complete the toolkit on time). In these instances, we will reach out and provide additional information and reminder text.]

As a thanks for your help, we will provide your organization a [FULL: \$250/ PARTIAL: \$100] honorarium. We will be in touch at the end of the study to discuss honorarium logistics.]

Flyer

Please share **the attached flyer** with home-based providers who may be eligible to participate in the study.

- If you plan to send out an email blast to providers or post in a newsletter, please let me know and I can provide sample text for you to use to describe the study.

Are there any upcoming virtual events where someone from your organization or the study team could share the flyer and information about the study? If so, can you share the dates for any **virtual** group meetings or events for providers between **now and the end of [DATE]**?

[IF SITE COORDINATOR ROLE ACCEPTED AND BOX SELECTED:

Box

To contact home-based providers about participating in the study, we will need some information about these providers, **specifically the provider's first and last name, phone number, and email address. To securely transmit this information, we have created a folder for your organization on Box that contains a spreadsheet for you to fill.** Box is a secure file storage site where only you and the study team will be able to see the information in your folder.

Someone at Mathematica will send you an email with a link to the secure program folder in the coming days (please note that sometimes Box emails get sent to spam folders, so please check if you don't receive the invite in the next few days!).

If you have not created an account with Box before, you will be prompted to create an account. If you've previously created a Box account using the email address you provided, you can sign in using your existing credentials. Once you access your folder on Box, you can download and upload any files you want. The **attached user guide** includes detailed instructions for these steps, along with helpful screenshots. This user guide also details the information that we are requesting from you, as well as the requested timeline.

As a reminder please **DO NOT email any documentation including provider names; only upload your information about providers to Box, our secure data site.]**

Call summary

Target number of providers

We welcome as many providers as your organization can send our way. If you need a target number, it would be great to aim for [TARGET NUMBER] or so English-speaking providers.

Eligibility criteria

Providers are eligible to participate in the study if they:

1. Are at least 18 years old
2. Regularly care for at least one school-age child (age 5 and in kindergarten or ages 6-12) who is not their own in a home **for at least 10 hours per week and at least 8 weeks in the past year**
3. Are comfortable reading and writing in **English** (for this study, we are only testing the English version of the provider questionnaire)

What we are asking providers to do (see attached provider flyer for more)

- We are asking for providers to talk with us for [NO OBSERVATION: 20 minutes] [OBSERVATION: 25 minutes], complete a 50-minute questionnaire, and to ask their families with

school-age children to complete the family survey. [OBSERVATION: A member of the study team will also observe them caring for children in their home.]

- Providers will receive a **[NO OBSERVATION: \$65 gift card/OBSERVATION: \$70 gift card]** for completing the questionnaire and a **\$10 gift card** in recognition of the time it will take them to share the family survey with families.
 - The family survey will take about **15 minutes** for family members to complete. Family members who participate will receive **\$15 in gift cards**.
- [OBSERVATION: Providers will receive a \$10 gift card for scheduling the observation visit.]

Please let me know if you have any questions. We are very grateful for your partnership!

Thank you,
[NAME]

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Appendix A.5

Community organization thank you message

A.5 Community organization thank you message

LIAISON WILL TAILOR THIS EMAIL BASED ON EACH ORGANIZATION'S ROLE AND HONORARIUM

Subject: Thank you for your help on the HBCC-NSAC Toolkit Study!

Dear [COMMUNITY ORGANIZATION CONTACT NAME],

On behalf of the study team and the Administration for Children and Families, we want to thank you for [COMMUNITY ORGANIZATION NAME]'s participation in the Home-Based Child Care Toolkit for Nurturing School-Age Children (HBCC-NSAC Toolkit) Study! Your support recruiting home-based providers was extremely helpful.

I wanted to share a few updates on the study:

- The study data collection period has now closed. We'll no longer be reaching out about sharing the flyer, sharing names, or sending out reminders. We appreciate all of your help collaborating with us!
- All participants who completed the study activities will receive (or already received) a thank you letter and gift card as a token of our appreciation. Please let us know if you get questions from providers about their participation.
- [COMMUNITY ORGANIZATION NAME] will receive [FULL: \$250/ PARTIAL: \$100]. [HONORARIUM PAYMENT INSTRUCTIONS]

Please let us know if you have any questions or concerns.

Sincerely,
[NAME]

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