Public Burden Statement: This information collection is part of the Assessing and Describing Practice Transitions Among Evidence-Based Home Visiting Programs in Response to the COVID-19 Public Health Emergency Study, which aims to identify and study practices implemented in response to the COVID-19 public health emergency that support evidence-based practice and have the potential to enhance home visiting programming. One of the practices the study identified is the use of informal contacts. Informal contacts are any contacts between a home visitor and family that occur between formal home visits (e.g., text messages, emails). The purpose of this information collection is to better understand, through rapid cycle learning, how MIECHV-funded home visiting programs can use informal contacts to improve service delivery and promote caregiver’s engagement and satisfaction. The OMB control number for this information collection is 0906-0098 and it is valid until 7/31/2027. This information collection is voluntary. Data will be private to the extent permitted by the law. The time required to complete this information collection is estimated to average less than 1 hour per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: HRSA Information Collection Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857 or paperwork@hrsa.gov, Attention: Information Collections Clearance Officer.

Family Focus Group Protocol

*Thank you for taking the time to talk with us today. My name is [NAME] and this is [co-facilitator/notetaker NAME(s)]. We work as research analysts with The Policy & Research Group (PRG). On behalf of the Health Resources and Services Administration (HRSA), and in collaboration with the Office of Planning, Research, and Evaluation (OPRE) in the Administration for Children and Families (ACF), we are carrying out a project that aims to identify, develop, study, and share evidence-informed strategies and resources that early childhood home visiting (ECHV) programs like [NAME OF HV PROGRAM] may use to improve home visiting services, and, outcomes for children and families. Today we are going to be talking about your experiences with what we are calling informal contacts. When I talk about informal contacts, I’m talking about efforts your [HOME VISITOR TITLE]* *has made to reach out to you or your family in between home visits to connect with you, to check in to see how you and your family are doing, or to give you information that you may find useful*.

* **[Phase 1: Co-Definition]**
	+ *We are particularly interested in hearing about how and when your [HOME VISITOR TITLE]* *has contacted you or reached out to you in between home visits – we are calling these informal contacts ) and how you feel about these kinds of contacts from your [HOME VISITOR TITLE].*
* **[Phase 4: Summary]**
	+ *In this final discussion, we want to hear about what’s been happening lately and recent contacts you’ve had with your [HOME VISITOR TITLE] in between home visits – which we refer to as informal contacts.*

*Your participation in our discussion today is completely voluntary, and you can leave the call at any time. Your decision about whether to participate in this focus group or to answer any specific questions will not affect any services that you receive. I may ask you a question directly, but you don’t have to answer anything you don’t want to. This is just an effort to make sure we hear from everyone today. Please know that the information you share today is confidential and only study staff will have access to the notes, recordings, and transcripts. Study staff may summarize what we discuss today to share with interested parties (e.g., staff in your program, HRSA, or other programs participating in the study), but no identifiable information or individual responses will be shared. We ask you to please respect each other’s privacy by not sharing any personal information or experiences discussed during the focus group.*

*There are no known risks to your participation in this focus group. Although you may not see direct benefits associated with your participation, the information we gather will be used to improve home visiting services in the future. As a token of our appreciation, we will offer you a $40 gift card after the focus group ends.*

***[When caregivers agreed to join this focus group, they were asked if they were comfortable being audio-recorded. Everyone who agreed is in this session. If anyone did not agree, they will be on a separate call and when holding that call, this same protocol is used, and this paragraph is skipped.]***

*When you agreed to participate in this focus group, each of you said you were comfortable being recorded. You may leave this discussion at any time – by remaining you are agreeing to participate and have the discussion recorded. Does anyone have any questions before I start recording?* **[Answer questions].** *I’m going to begin the recording so that we can make sure we accurately capture what is said (that we remember the discussion correctly).*

*As we are getting things set up to record and get our discussion underway – I’m going to send out a link to a quick survey in the Zoom chat [or via email, if using phone]. The survey asks you to answer a few questions about yourself, so we have an understanding of who participated in our discussions. Like your participation in this discussion, filling out the survey is voluntary. You do not have to respond to all or any of the questions. Your name is not on the survey and will not be connected to your responses. By filling out the survey you are agreeing to allow the study team to see your responses and use your answers to describe (summarize) who was involved in the focus groups we conducted. Is everyone able to click on the link? [****troubleshoot as necessary****]. Great. If you are willing to fill out the survey, please take a few minutes to do so now and we’ll get started in [5 minutes, at TIME].*

*Ok. We are set up and I’m going to begin recording now.* **[Start to record].** *Before we get started, I’d like us to set a few ground rules for the conversation.*

*[****If using Zoom by video or calling in****]*

*Since we are using Zoom today, I’ll keep my video on the whole time, but you can choose to have your video on or off. We want to make sure that everyone has the opportunity to have their thoughts and opinions heard. So, to avoid us talking over each other, I’ll be helping to direct the conversation. If you want to speak, you can let me know in the chat, click the “raise hand” button, or just chime in when there is a pause in conversation (this is particularly important if calling in instead of using video). Also, I want to emphasize that there are no right or wrong answers, and we are interested in hearing both positive and negative comments and opinions – or whatever you think is important to share. We only ask that you do not use the names of clients or staff outside of this focus group to help maintain everyone’s privacy. Those are all of the guidelines I have - does anyone have additional guidelines for our conversation that you would like us to consider? Does anyone have any questions about Zoom or the guidelines for our discussion?* **[Confirm that everyone understands Zoom features and can mute/unmute]***.*

*[****If using Phone/conference call****]*

*We want to make sure that everyone has the opportunity to have their thoughts and opinions heard. So, to avoid us talking over each other, I’ll be helping to direct the conversation. If you want to speak, you can chime in when there is a pause in conversation, otherwise, before we move on to different topics, I will provide an opportunity for people to voice their opinions. Also, I want to emphasize that there are no right or wrong answers, and we are interested in hearing both positive and negative comments and opinions – or whatever you think is important to share. We only ask that you do not use the names of clients or staff outside of this focus group to help maintain everyone’s privacy. Those are all of the guidelines I have - does anyone have additional guidelines for our conversation that you would like us to consider? Does anyone have any questions about the guidelines for our discussion?* **[Confirm that everyone understands how to mute/unmute]***.*

*In all, this should take between 30 minutes and an hour. Does anyone have any questions before we get started?* **[Answer questions.]**

Part 1: Background

**[The questions in this section are asked during Phase 1: Co-Definition only. This section is intended to introduce all members of the focus group to each other and open the conversation before moving in the next section.]**

*First, I’d like us to go around and introduce ourselves. I know that we’re all just meeting each other, so I can share a little more about myself first.* **[facilitator can share information about self, then cofacilitator, and can also introduce notetaker]**

*Great. Now if each of you could introduce yourselves telling us your first name only (to protect privacy), how long you’ve participated in [NAME OF HV PROGRAM] and the age of your child or children who participate. Let’s start with* **[insert first name, roll call rest of participants].**

*Thanks everyone. Now that we know a little bit about each other, let’s begin by talking about your experiences with [NAME OF HV PROGRAM].*

Part 2: Strategies Implemented

**[The questions in this section are asked during Phase 1: Co-Definition and Phase 4: Summary. This section gathers information on how informal contacts are used.]**

*I’d like to begin our conversation by hearing about your experiences with informal contacts – and as a reminder, I’m talking about times your [HOME VISITOR TITLE] has reached out in between home visits in an effort to connect with you, see how you are doing, or to share some information. As examples - this might have started as a reminder about an appointment but ended in you having a conversation, this could have been them asking how you were doing, or something like them providing you some information and asking if you have questions or want to chat about it.*

**Question** Can someone describe to me a recent informal contact you’ve had? **[allow each participant to provide an example]**

**Question**:Would you say that these examples are pretty typical of the informal contacts you’ve had [TIMEFRAME]?

* **Follow-up**:If not, can you tell me about what is typical for you OR why these are not typical?
* **Follow-up**: How often would you say you receive informal contacts from your [HOME VISITOR TITLE]?
* **Follow-up**: How has your [HOME VISITOR TITLE] contacted you (for example, have they called, texted, emailed)?
* **Follow-up**:Why has your [HOME VISITOR TITLE] made informal contacts with you (what is the purpose of the contact)?
* **Follow-up**:Have you noticed any changes in the way your [HOME VISITOR TITLE] has been contacting you? If so, can you discuss?

**Question**: How do you typically respond to informal contacts from your [HOME VISITOR TITLE]?

* **Follow-up**: Does the way you respond depend on the contact itself – what your [HOME VISITOR TITLE] is saying or sending? Can you please explain?
* **Follow-up**: Do you feel like your [HOME VISITOR TITLE] expects you to respond to them?

**[Before moving on to the next question, make sure everyone has had the opportunity to voice their opinions.]**

Part 3: Facilitators of and Challenges to Implementation

**[The questions in this section are asked during Phase 1: Co-Definition and Phase 4: Summary. This section gathers information on supports and barriers that families experience in relation to informal contacts**.**]**

**Question**: What platform or format does your [HOME VISITOR TITLE] use to contact you in between visits?

* **Follow-up**: What platform or format do you prefer?

**Question**: Please tell me about any challenges in the informal contacts you’ve had with your [HOME VISITOR TITLE].

* + **Probe**: ease or difficulty of receiving the communication/information,ease or difficulty of responding to communication/information

**[Before moving on to the next question, make sure everyone has had the opportunity to voice their opinions.]**

Part 4: Perception of Strategies

**[The questions in this section are asked during Phase 1: Co-Definition and Phase 4: Summary. The section gathers information on how families experience and feel about the use of informal contacts.]**

**[Phase 1: Co-Definition]**

**Question**: What do you see as the purpose or value of informal contacts?

**Question:** How do they affect how engaged (interested or involved) you feel with the program?

* + **Probe**: description of how communications change experience with home visits

**Question:** How do you think they influence the relationship you have with your [HOME VISITOR TITLE]?

* + **Probe:** comfort with[HOME VISITOR TITLE]; connection with [HOME VISITOR TITLE]

**Question:** How do you think they influence how connected you feel to your family, program, or your community? If so, can you please explain?

**Question**: Do you feel they have influenced how satisfied you feel with your home visits or with the program more generally? Please explain.

**[Before moving on to the next question, make sure everyone has had the opportunity to voice their opinions]**

**[Phase 4: Summary]**

**Question**: What are your overall thoughts about your experience with informal contacts [TIMEFRAME]?

* **Follow-up**: What do you like and not like about these contacts between visits?
* **Follow-up**: How satisfied are you with how frequently you have been contacted?
* **Follow-up**: How satisfied are you with what your [HOME VISITOR TITLE] shared, what they said, or the conversation/interaction you had?
* **Follow-up**: How did they make you feel?

**Question**: During virtual home visits in the past few months, did your home visitor do [strategy chosen by site for implementation] or [(if applicable), strategy with adaptations identified through rapid learning throughout the study]? Please explain.

**Question**: What do you see as the purpose or value of [selected strategy]?

* **Follow-up**: How has [strategy] affected how engaged (interested or involved) you feel with the program?
	+ **Probe**: description of how communications change experience with home visits

**Question:** How do you think [strategy] influences the relationship you have with your [HOME VISITOR TITLE]?

* + **Probe:** comfort with[HOME VISITOR TITLE]; connection with [HOME VISITOR TITLE]

**Question**: How do you think [strategy] influences how connected you feel to your family, program, or your community?

**Question**: Do you feel they have influenced how satisfied you feel with your home visits or with the program more generally? Please explain.

**[Before moving on to the next question, make sure everyone has had the opportunity to voice their opinions.]**

Part 5: Wrap-up/Final Questions

**[This section is asked during Phase 1: Co-Definition and Phase 4: Summary. This section is the closing of the focus group and is used to make sure we address any outstanding questions and ensure we ask if anyone has anything additional to share before we end the focus group.]**

**Question**: In closing, is there anything else you’d like to share?

*Thank you very much for participating in this focus group! If you have questions about this discussion, or how the transcript will be used, feel free to contact me.*

**[Phase 1: Co-Definition]**

*Our next focus group will be [provide timing] and will be Phase 4: Summary of the study process, after the program has implemented practice changes related to informal contacts. We will then be gathering your feedback on these changes and your general experiences with informal contacts again at that alternate date.*

*If you have any questions about the study, please contact Teresa Smith at The Policy & Research Group (**teresa@policyandresearch.com* *or (225) 281-3783).*

*If you have questions about your rights as a research volunteer, you can call Health Media Lab Institutional Review Board at (202) 246-8504.*