Instrument 1

Centralized Intake Administrator Screening Talking Points or Screening Email with Questions



Subject line: Request for Information about [Centralized Intake System]

To: [Centralized Intake Administrator]

From: [Mathematica research team liaison]

Dear [Centralized Intake Administrator],

I am writing to you because your organization operates [the Centralized Intake System], which was nominated for inclusion in the Understanding and Expanding the Reach of Home Visiting (HV-REACH) project. This project is taking an in-depth look at centralized, coordinated, and collaborative ways of screening families and matching them to a home visiting program in their community.

To do so, it will include case studies of up to seven centralized intake systems. Your participation in this project will support efforts to improve processes used for outreach, screening, referrals, and enrollment of families —particularly for those who are not being consistently reached. Participation is voluntary and is estimated to take 20 minutes. All information that you share will be kept private. Further details on the project and what your participation will involve can be found in the attached FAQ.

Mathematica, an independent research organization, is leading this project in partnership with the Brazelton Touchpoints Center and Social Grove. The project is sponsored by the Office of Planning, Research, and Evaluation (OPRE) in the Administration for Children and Families (ACF), U.S. Department of Health and Human Services, in collaboration with the Health Resources and Services Administration (HRSA).

At this time, I would like to collect some preliminary information about your organization and [fill Centralized Intake System]. This information will help us determine whether your centralized intake system will be one of the seven systems featured in the case studies. Before final selection, similar information is being gathered from other centralized intake systems to ensure that a range of approaches are included in the project.

[ADJUST QUESTIONS BASED ON INFORMATION WE HAVE GATHERED FROM PUBLICLY AVILABLE INFORMATION. IF THE INFORMATION NEEDED IS MINIMAL, SAY: Please answer the following questions by email or we can schedule a phone call to discuss. [IF THE INFORMATION NEEDED IS MORE DETAILED SAY: I would like to schedule a time to discuss the following questions with you.]

- Has your centralized intake system made referrals to at least one home visiting program in the past two months?
- What is the geographic scope of your centralized intake system: statewide, regional, or local?
- What early childhood home visiting models do you refer to—for example, Nurse-Family Partnership or Parents as Teachers?

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 # for the described information collection is 0970-0XXX and the expiration date is XX/XX/XXXX.

To: [C-Intake Administrator] Mathematica

From: [Mathematica Research Team Liaison]

Date: [Date]

Page: 3

 Does your centralized intake system refer to home visiting only or home visiting and other types of services?

- How long has your centralized intake system been operating? Has it been actively referring families for at least six months?
- Which description best captures your centralized intake system: (a) a single entity
 conducts screenings and makes referrals to home visiting programs, (b) multiple entities
 use a common screening and referral process and jointly decide where to refer families, (c)
 multiple entities use shared outreach and intake materials and families chose the program
 that best meets their needs, (d) other?
- Does your organization conduct outreach to families and screen them for fit or eligibility of home visiting programs? How?
- Does your organization have at least one dedicated staff member who conducts centralized intake?
- Do you share any kind of data with the home visiting programs you work with? What type of data?
- I'd like to understand how you work with partners, such as home visiting programs or other agencies involved in centralized intake. For example, do you have a Memorandum of Understanding or MOU with them or are they on your advisory board?

[IF INFORMATION NEEDED IS MINIMAL: If you prefer to provide this information over the phone] I can call you at one of the following times:

- Date and time 1
- Date and time 2
- Date and time 3

If I don't hear back from you in the next few days, I will call you to follow up. I appreciate your assistance and potential participation in this important project.

Sincerely,

[Name and title of the research team liaison]