

Appendix H

State Director and Project Staff Survey Outreach Materials

Federal Agency Endorsement Letter

[FEDERAL AGENCY LETTERHEAD]

[DATE]

Dear [STATE AGENCY] Director:

I am writing to request your participation in the **[YEAR] Pathways to Partnerships State Agency Leader Survey** being conducted as part of the U.S. Department of Education, Rehabilitation Services Administration's evaluation of the 84.421E Federal fiscal year 2023 Disability Innovation Fund, Pathways to Partnerships Innovative Model Demonstration Projects. This voluntary survey collects data from key state agencies and organizations that deliver services to children and youth with disabilities.

The survey, which is being sent to the directors of [AGENCY] in all 50 states and the District of Columbia, is a valuable opportunity to learn about the service environment, how organizations collaborate with one another, and the barriers that children and youth with disabilities face in achieving their educational, employment, and independent living goals. Ultimately, the results will provide information that the Rehabilitation Services Administration and its Federal partners can use to support organizations that serve children and youth with disabilities.

Responses to this data collection will only be used for statistical purposes and never connected to your state agency or organization. The reports prepared for this study will summarize findings across the sample and not associate responses by you. The research team will combine what they learn from you with what they learn from other people. We will not provide information that identifies you to anyone outside the study team, except as required by law.

You will receive the survey via email within the next [TIMEFRAME] from [NAME AND EMAIL ADDRESS].

We greatly appreciate the time and effort you will take to complete this survey, which should take no more than 30 minutes. [IF APPLICABLE: As a token of appreciation, you will receive a \$30 electronic gift card upon completing the survey.]

If you have any questions about the survey, please call [NAME] at [PHONE] or send an email to FFY23DIF@mathematica-mpr.com.

Thank you in advance for your participation in the survey.

Sincerely,

[FEDERAL AGENCY STAFF SIGNATURE AND TITLE]

State Director and Project Staff Survey Initial Outreach Communication

Subject: Invitation to participate in the Pathways to Partnerships National Evaluation Survey

Dear [FNAME] [LNAME],

The U.S. Department of Education, Rehabilitation Services Administration (RSA) awarded 20 state vocational rehabilitation or education agencies with funding to implement Pathways to Partnerships model demonstration projects through the Disability Innovation Fund. The projects' purpose is to create and implement systematic approaches to delivering services to children and youth with disabilities, including close partnerships across key agencies that deliver these services in ways that improve the education and employment outcomes of children and youth with disabilities.

As part of this work, RSA is sponsoring a National Evaluation of the Pathways to Partnerships Program. One goal of the national evaluation is to understand the service systems for children and youth with disabilities in all states and assess how they evolve in the Pathways to Partnerships states. Mathematica is conducting this study for RSA in partnership with M. Davis and Company.

We are contacting you to take a short survey about your role at your organization, your relationships with other organizations, and your perspectives on aspects of the service delivery system that help children and youth with disabilities transition from school to adult life. Your participation in this survey is important and will help us learn about transition practices and partnerships in your state [FILL FOR NON-GRANT STATES: even if your state is not part of the Pathways to Partnerships initiative].

Your participation in the survey is completely voluntary. [FILL FOR CILS: A **\$30 electronic gift card** will be provided as a thank you for completing the survey]. The survey should take no more than 30 minutes to complete. You may skip any questions you don't want to answer. Your responses will be kept confidential. If you have any questions or concerns about this study, please call [NAME] at [PHONE] or send an email to FFY23DIF@mathematica-mpr.com.

Please click on the link below to take the survey online. If you prefer to have someone else in your organization complete the survey on your behalf, please forward the survey link to that individual.

[SURVEY LINK HERE]

OR, to complete the survey by phone, please call [CONTACT NUMBER].

We greatly appreciate your taking part in this study.

Pathways to Partnerships National Evaluation Team

State Director and Project Staff Survey Nonreponse Follow-up Communication



Subject: REMINDER: Please complete the Pathways to Partnerships National Evaluation Survey

Dear [FNAME] [LNAME],

We've been trying to contact you about participating in the Pathways to Partnership National Evaluation survey but have been unable to reach you. **Your help is valuable and only you can tell us about your organization's experiences.** The survey should take **no more than 30 minutes** of your time. [FILL FOR CILS: **You will receive a \$30 electronic gift card for completing the survey**].

Please click on the link below to take the survey online. If you prefer that someone else in your organization complete the survey on your behalf, please forward the link to that individual.

[SURVEY LINK HERE]

OR, to complete the survey by phone, please call [CONTACT NUMBER].

If you have any questions or concerns about this study, please call [NAME] at [PHONE] or send an email to FFY23DIF@mathematica-mpr.com.

We greatly appreciate your taking part in this study.

Sincerely,
Pathways to Partnerships Evaluation Team