

Attachment L
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Healthy Transitions Initiative Cross-Site Evaluation

National Expert Consultation Invitation List

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Healthy Transitions Initiative Cross-Site Process Evaluation

SCRIPTS to invite participants

For communicating with young people:

You are enrolled in a program that helps you with becoming an adult. We call this a transition program. This transition program is called the Healthy Transition Initiative (HTI). The Healthy Transition Initiative (HTI) is participating in a national evaluation with the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA) in the U.S. Department of Health and Human Services, ICF Macro, and the University of South Florida.

The people who administer the transition program want to find out how successful their program is in meeting your needs as you become an adult. They want to learn what works best for youth and young adults in transition. By doing this evaluation, we hope to learn about your experiences and to hear your ideas on how the transition program can be improved.

You are being asked to take part in this project because we need your ideas and opinions on how our transition program works and how it can be improved. To do that, we're going to hold a group discussion with 6 to 8 young people who are enrolled in our program. I'm going to tell you a little more about it before I ask if you're interested in participating.

Two people called evaluators from the University of South Florida in Tampa will conduct the group discussion on _____ (date). It will last approximately 1.5 hours. You will be asked to talk about the transition program, what is being done with you in the program that helps you and your family and what seems to make a difference.

If you agree to attend, you'll participate in a group discussion other program participants and the evaluators. At the conclusion of the group discussion, you'll receive a \$20.00 gift card as thanks for your time and participation.

There is absolutely no risk to you for participating. Your services will not be affected if you decide not to participate. It's your choice.

Would you like to participate in the group discussion on _____ (date)?

(If respondent agrees to participate, say)

That's great. What times are best for you? ***(Wait for response)*** Thank you. I'll get back to you once we find out the best time for all the participants.

(If respondent declines to participate, say)

Thank you for listening. Please get back to me by _____ (date) if you change your mind.

Healthy Transitions Initiative Cross-Site Process Evaluation

SCRIPTS to invite participants

For communicating with Youth Mentors or Informal Key Players:

You have been identified as a youth mentor or an informal key player in a young person's transition to adulthood. The young person is enrolled in a program that assists him or her with becoming an adult. We call this a transition program. This transition program is called the Healthy Transition Initiative (HTI). The Healthy Transition Initiative (HTI) is participating in a national evaluation with the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA) in the U.S. Department of Health and Human Services, ICF Macro, and the University of South Florida.

The people who administer the transition program want to find out how successful the program is in meeting the needs of young people as they become adults. They want to learn what works best for youth and young adults in transition and their families. By doing this evaluation, we hope to learn about your experiences and hear your ideas on how the transition program can be improved.

You are being asked to take part in this project because we need your ideas and opinions on how our transition program works for youth and young adults and how it can be improved upon. To do that, we're going to hold a group discussion with 6 to 8 youth mentors or informal key players of youth enrolled in our program. I'm going to tell you a little more about it before I ask if you're interested in participating.

Two evaluators from the University of South Florida in Tampa will conduct the group discussion on _____ (date). It will last approximately 1.5 hours. You will be asked to talk about the transition program, what is being done in the program that helps youth and families and what seems to make a difference.

If you agree to attend, you'll participate in a group discussion other program participants and the evaluators. At the conclusion of the group discussion, you'll receive a \$20.00 gift card as thanks for participating.

There is absolutely no risk to you or your young person for participating. Services will not be affected if you decide not to participate. It's your choice.

Would you like to participate in the group discussion on _____ (date)?

(If respondent agrees to participate, say)

That's great. What times are best for you? ***(Wait for response)*** Thank you. I'll get back to you once we find out the best time for all the participants.

(If respondent declines to participate, say)

Healthy Transitions Initiative Cross-Site Process Evaluation

SCRIPTS to invite participants

Thank you for listening. Please get back to me by _____ (date) if you change your mind.

Healthy Transitions Initiative Cross-Site Process Evaluation

SCRIPTS to invite participants

For communicating with transition program personnel:

Your transition program is involved in the Healthy Transition Initiative (HTI). The Healthy Transition Initiative (HTI) is participating in a national cross-site process evaluation with the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA) in the U.S. Department of Health and Human Services, ICF Macro, and the University of South Florida.

This evaluation is being conducted to find out how transition programs compare to best transition practices and what seems to work best for youth and young adults in transition and their family.

We are asking for your help to ensure that the HTI evaluation is the best we can make it. First, we are counting on you to assist in contacting a total of _____ (number) youth and young people volunteers, ages 16–25, to participate in a focus group and survey. We're looking for young people who are demographically representative of all young people in our program. Then, we need your help to contact youth mentors or informal key players in any youth's transition (i.e., parents, guardians, friends, or other family-like or natural supports) to ask if they would agree to participate in a separate focus group.

At the end of the focus groups, we will give each participant a \$20.00 gift card as thanks for their time and participation. We will give you scripts to use when contacting your young people and their informal key players. You will need to follow up with all participants the week prior to the assessment to confirm their attendance.

You will also complete a brief survey before _____ (date). It will take you 30 minutes or less to complete the survey. You will return your survey to _____ in a sealed envelope to protect the confidentiality of your responses.

In addition, on _____ (dates), evaluators from the University of South Florida will interview (you/some of you) for approximately one hour. We will schedule the interviews and focus group sessions and provide the final schedule to evaluators from the University of South Florida.

Be assured that what you put on the survey and what you tell the evaluators will be held in the strictest confidence. Results will be reported at the program level. Nothing you say will be reported so you could be identified as the source of the information.

We at _____ (name of program) and the evaluators from the University of South Florida recognize that you are extremely busy and deeply appreciate your time and effort to complete this evaluation.

E-mail/Mailed Invitation to Participate

Dear [Participant]:

The Center for Mental Health Services (CMHS) and the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services is sponsoring a cross-site evaluation of the Healthy Transitions Initiative (HTI). They are doing this because they want to understand how well the HTI program is working. You are being invited to help us with this by completing a questionnaire. The questionnaire was designed to ask about your education, employment, relationships with friends and family, your health, different types of life skills, and your contact with the juvenile or criminal justice systems. Hearing how you feel about the program is very important to this evaluation and could help to improve HTI services in the future.

Here are some things we want you to know about completing this survey:

- Completing this survey is completely voluntary.
- You may choose not to answer any question or to stop answering questions at any time, for any reason.
- Completing the survey will take approximately 60 minutes.
- Any information that you provide will be protected and kept private to the extent that the law allows. No one other than evaluation staff will know who you are and what answers you gave. None of your personal information (like, your name, your address, or your date of birth) will be used in any reports about this evaluation. All information will be presented in group form.
- There are minimal risks to participating in this evaluation. You may feel some discomfort sharing information with the interviewer. You may also feel uneasy with some of the questions. You will be free to stop the questionnaire at any time with no penalties.
- You may benefit from contributing to how much we know and can learn about what young people need to successfully become adults. The type of information that you share could educate, inform, and improve future HTI services that you, or others, receive.

In the next two weeks, you will be contacted by (HTI local evaluator) . This person will talk with you more about the evaluation.

We hope that you will decide to continue to participate in the evaluation. The information that you provide will contribute to a better understanding of the impact of the federally funded Healthy Transitions Initiative program.

Sincerely,

Tara R. Earl, Ph.D.
HTI Cross-Site Evaluation Project Manager
ICF Macro
3 Corporate Square
Atlanta, GA 30329
(404) 592-2129
E-mail: tearl@icfi.com

E-mail/Mailed Invitation to Participate

Dear [Participant]:

The Center for Mental Health Services (CMHS) and the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services is sponsoring a cross-site evaluation of the Healthy Transitions Initiative (HTI). They are doing this because they want to understand how well the HTI program is working. You are being invited to help us with this by completing a questionnaire. The questionnaire was designed to ask about your education, employment, relationships with friends and family, your health, different types of life skills, and your contact with the juvenile or criminal justice systems. Hearing how you feel about the program is very important to this evaluation and could help to improve HTI services in the future.

Here are some things we want you to know about completing this survey:

- Completing this survey is completely voluntary.
- You may choose not to answer any question or to stop answering questions at any time, for any reason.
- Completing the survey will take approximately 60 minutes.
- Any information that you provide will be protected and kept private to the extent that the law allows. No one other than evaluation staff will know who you are and what answers you gave. None of your personal information (like, your name, your address, or your date of birth) will be used in any reports about this evaluation. All information will be presented in group form.
- There are minimal risks to participating in this evaluation. You may feel some discomfort sharing information with the interviewer. You may also feel uneasy with some of the questions. You will be free to stop the questionnaire at any time with no penalties.
- You may benefit from contributing to how much we know and can learn about what young people need to successfully become adults. The type of information that you share could educate, inform, and improve future HTI services that you, or others, receive.

Any questions you have can be answered at any time by (HTI Site Liaison) at ICF Macro at (404) XXX-XXXX, or at XXX@icfi.com.

In the next two weeks, you will be contacted by one of our evaluation team members, (HTI local evaluator), to schedule a date and time to meet and complete the questionnaire.

We hope that you will chose to participate because the information you provide will contribute to a better understanding of the impact of the federally funded Healthy Transitions Initiative program.

Sincerely,

Tara R. Earl, Ph.D.
HTI Cross-Site Evaluation Project Manager
ICF Macro
3 Corporate Square
Atlanta, GA 30329
(404) 592-2129
E-mail: tearl@icfi.com

3rd-Month Reminder E-mail

Dear [Participant]:

Thank you again for agreeing to participate in the cross-site evaluation of the Healthy Transitions Initiative (HTI) program. This federally sponsored evaluation is conducted by a team led by ICF Macro in Atlanta, Georgia, and is funded by the Center for Mental Health Services (CMHS), which is part of the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services. The information that you provide will help us better understand and improve outcomes for youth and young adults with serious mental health conditions in areas such as education, employment, housing, mental health and co-occurring disorders, and decrease contacts with the juvenile and criminal justice system. In about two months, you will be contacted by one of the HTI evaluation team members and asked to complete another questionnaire.

This important Federal effort is working hard to improve services for youth and young adults who are striving to become successful adults. The questionnaire should take about 60 minutes to complete and you will receive a \$20 gift card to thank you for your time. We understand that your time is valuable and will be able to meet at a location that is most convenient for you. Although your participation in this evaluation is completely voluntary, the information that you share is important for us to have a true understanding of experiences of young adults in the HTI program.

If you have any questions, please do not hesitate to contact me or my colleague from ICF Macro, (HTI Site Liaison), at XXX@icfi.com or (404) XXX-XXXX.

Thank you in advance for your willingness to participate and to share your experiences. We will be in touch soon.

Sincerely,

HTI Local Evaluator Contact Information

5th-Month Reminder E-mail

Dear [Participant]:

About 2 months ago I contacted you about participating in the cross-site evaluation for the Healthy Transitions Initiative (HTI). This federally sponsored evaluation is conducted by a team lead by ICF Macro in Atlanta, Georgia, and is funded by the Center for Mental Health Services (CMHS), which is part of the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services. We would greatly appreciate it if you would participate. The questionnaire should take about 60 minutes to complete and you will receive a \$20 gift card to thank you for your time. We understand that your time is valuable and will be able to meet at a location that is most convenient for you. I will contact you within the next two weeks to schedule a time for us to complete the questionnaire.

If you have any questions, please do not hesitate to contact me or my colleague from ICF Macro, (HTI Site Liaison), at XXX@icfi.com or (404) XXX-XXXX.

Sincerely,

HTI Local Evaluator Contact Information

First Reminder – E-mail (2 weeks after 6-month questionnaire date)

Dear [Participant]

About two weeks ago, I tried to contact you about the cross-site evaluation for the Healthy Transitions Initiative (HTI). This Federally sponsored evaluation is conducted by a team lead by ICF Macro in Atlanta, Georgia, and is funded by the Center for Mental Health Services (CMHS), which is part of the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services. We would greatly appreciate it if you would participate. The questionnaire should take about 60 minutes to complete, and you will receive a \$20 gift card to thank you for your time. We understand that your time is valuable and will be able to meet at a location that is most convenient for you. If you are not able to meet in person and would prefer to complete the questionnaire over the telephone, please let me know.

If you have any questions or concerns we would really like to hear from you. Please do not hesitate to contact me or my colleague from ICF Macro, (HTI Site Liaison), at XXX@icfi.com or (404) XXX-XXXX.

Sincerely,

HTI Local Evaluator Contact Information

Second Reminder – E-mail (4 weeks after 6-month questionnaire date)

Dear [Participant]

About a month ago, I tried to contact you about the cross-site evaluation for the Healthy Transitions Initiative (HTI). This Federally sponsored evaluation is conducted by a team lead by ICF Macro in Atlanta, Georgia, and is funded by the Center for Mental Health Services (CMHS), which is part of the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services. We understand that your time is valuable and will be able to meet at a location that is most convenient for you. The questionnaire should take about 60 minutes to complete, and you will receive a \$20 gift card to thank you for your time. If you are not able to meet in person and would prefer to complete the questionnaire over the telephone, please let me know.

If you have any questions or concerns we would really like to hear from you. Please do not hesitate to contact me or my colleague from ICF Macro, (HTI Site Liaison), at XXX@icfi.com or (404) XXX-XXXX.

Sincerely,

HTI Local Evaluator Contact Information



Date

Participant's Name

Street Address

City, State, ZIP Code

Dear [Participant],

We thank you for your time and participation in the Healthy Transition Initiative Cross-Site Evaluation. Your participation will help us understand the unique needs of youth in transition and improve services provided by the Healthy Transition Initiative. If you have any questions, please do not hesitate to contact Tara Earl at (404) 592-2129.

Sincerely,

The Healthy Transitions Initiative Cross-Site Evaluation Team



Cross-Site Evaluation Study Participation Receipt

Amount received: \$20 GC-Visa

Name of study participant: _____

Signature of study participant: _____

Date: _____

Evaluator/Staff signature: _____

___ Outcome Baseline or Follow Up Instrument

___ Young Person Focus Group

___ Youth Mentor Focus Group