

## **Instructions for Completing Common Study with Young Adult Ages 16 to 21**

The Common Study for the YIT evaluation should be done with all young adults, ages 16 to 21 who are receiving YIT funded services in your region. Items that need to be completed about the young adult within the first 7 days of intake if they are between the ages of 16 and 21:

### **Complete with all young adults to determine eligibility and if eligible, obtain consent:**

Study Inclusion Criteria Checklist  
Common Study Consent

### **Complete only if consented:**

Common Study Intake Form<sup>†\*</sup>  
May We Call You Form

YIT = Young Adult In Transition

<sup>†</sup>Once consented, we will ask that you complete the Common Study Follow up Form with each participating young adult every 6 months as long as s/he continues to receive services through 24 months post intake. When a participating young adult is discharged from services, we will ask that you complete the Common Study Discharge Form with him/her.

### **1. Study Inclusion Criteria Checklist**

The SICCC is used to determine whether each young adult client is eligible to participate in the Evaluation of the Vermont YIT System of Care. The checklist contains items indicating 1) whether a client meets criteria to participate in the evaluation, and 2) whether a client is at risk of meeting or does in fact meet the criteria for Severe Emotional Disturbance as defined under Act 264, which helps the evaluation team determine eligibility for the Vermont and National Studies. This form should be completed during your initial meeting with the young adult client using all available information. If the client is in crisis, it can be completed after the initial meeting in preparation for the next time you will see the client.

Please note, when completing this form, we do not want you to put the individual's name but rather use the ID system within your program. The reason for this is that we need to track this information but if an individual does not consent to the next step (see below), we CANNOT receive any identifying information. In addition, if we have questions for you (e.g. form is incomplete), we can reference your ID number and you will know to whom we are referring while the individual's identity will remain anonymous to us.

If the client is eligible, please continue to the next item. If the client is ineligible, STOP HERE.

## **2. Common Study Consent Form**

*Script for introducing the Common Study:*

“Vermont has received a federal grant to improve services across the state for young adults ages 16 to 21. The goal of this grant is to support young adults, as needed, to reach their full potential as they enter adulthood. The Vermont Child Health Improvement Program (VCHIP) at the University of Vermont and the Substance Abuse Mental Health Services Administration (SAMHSA), the grant funder, would like to learn more about the young adults using these services, how helpful they feel the services are and a quick glance at whether their lives are getting better from receiving these services. The Common Study is a way for us to get a little bit of data on a lot of young adults using mental health and related services in their community.

If you agree to participate, I would take 15 minutes to do 2 things. First, I would go over and have you sign a consent form saying you are willing to take part in this research study. Second, I would ask you about 15 questions that should take 5 minutes in total to answer. The questions ask briefly about education, housing, relationships with others, and legal status. Participating also means that you are willing to provide us with some basic data about yourself which we can get from the information you have already shared with us. This includes demographic information such as you age, gender, race, and ethnicity; who referred you to our services, reason for referral to services, and other agencies with which you are involved; and any mental health diagnoses you have received. We would ask you these questions every 6 months for as long as you are receiving services.

Your participation would also help to learn more about services for young adults, who is using them and whether they are helpful or not – both on a local, state, and national level! Would you be willing to participate?”

If the young adult under 18 years of age and their caregiver agree to participate, review the Common Study Consent Form with them, answer any questions they may have, and obtain written consent on 3 copies. You will keep one copy and give a copy each to the young adult and caregiver.

If the young adult is over 18 years of age and agrees to participate, review the Common Study Consent Form with him/her, answer any questions s/he may have, and obtain written consent on 2 copies. You will keep one copy and give a copy to the young adult.

If the client (or caregiver) does not want to participate, **SKIP TO THE MAY WE CALL YOU FORM AND COMPLETE WITH THE CLIENT (AND CAREGIVER IF UNDER 18 YEARS OF AGE).**

### **Common Study Intake Form**

The Common Study Intake Form contains questions about the client’s demographic information, diagnoses, as well as their education, legal, and housing status. This form should take approximately 10 minutes to complete and can be completed using information from the client’s

existing record and asking them the questions in sections 4 through 9. The questions for the client should take approximately 5 minutes.

*Please note: If there are items that overlap with your existing intake process, please let us know and we will work with you to eliminate redundancy in whatever way possible.*

### **May We Call You Form**

This form is used to obtain permission for the evaluation team to contact the young adult and invite her or him to participate in the evaluation of the Vermont YIT System of Care. This form needs to be completed with the client unless s/he is ineligible. A client is ineligible if s/he does not meet the at risk or SED criteria in the SICC above. If a client is ineligible, simply complete the box at the upper right hand corner of this form and return it to the evaluation team. This form does not need to be reviewed with the client if s/he is ineligible.

**If your client is eligible:** We have included a script to help go over this form in a way likely to increase the rate of positive responses allowing us to call them. We recommend that the information in the script below is shared first before showing the client the form. Otherwise, s/he might be trying to read the form while simultaneously having the study described to them which can be confusing or distracting for the client. It is important in reviewing this form with the client to emphasize that giving permission for us to call them does NOT mean they have agreed to participate. It only means that they are willing to hear more about the study. Our goal is to obtain as many positive responses as possible.

**If the client is under age 18, please direct the script to both the client and his or her parent or legal guardian.**

*Script for May We Call You Form:*

“I’d like to take a brief minute to talk to you about a second, more in-depth research study being done across Vermont that builds on the Common Study we just did. The second research study attempts to learn more about how the improvements in services for young adults across Vermont are working. Sharing more about your service experience and related information about yourself can help inform us about what are we doing well and what we need to keep working on to make sure services for Vermont’s young adults are the best possible. Because the second research study requires more of your time, compensation is provided as a token of appreciation for your efforts. The evaluation team at the University of Vermont would like a chance to call you and tell you more about this second research study to see if you would like to be a part of it. Saying “yes, you are willing to hear more” does not mean you have agreed to participate in the research study. It only means you are willing to receive a phone call from one of the evaluation team members to hear more about it. Also, if you choose not to be contacted by UVM to hear more, it will not affect the services you receive now or in the future in any way.”

“Would you be willing to have someone from UVM call you to hear more about the evaluation?”

*If Yes, have them complete and sign the form.*

*If No, please have them place a check next to “No, I do not wish to hear more about the study.”*

“Thank you for taking the time to talk about the research study with me.”

END.

After completing all forms, please mail or fax them to us as soon as possible. We need to be able to contact and interview the young adult (providing they consent to participate in the study) within 30 days of intake.

<u>VCHIP Address:</u>	<u>Phone numbers if questions:</u>
Attn: Tom Delaney	Tom Delaney (656-9192)
Vermont Child Health Improvement Program	Jody Kamon (656-8372)
University of Vermont, College of Medicine	Jesse Suter (656-1130)
St. Joseph's 7, UHC Campus	
1 S. Prospect Street	
Burlington, VT 05401	

FAX: 656-8368

If faxing the “May We Call You Form”, please write “confidential” on the coversheet.