





National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Community Voices of Experience



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Purpose of Close Out Site Visits

The primary purpose of the close out site visit is to:

- Identify and resolve data issues
- Review close-out evaluation timeline & responsibilities
- Discuss sustainability of the grantee community
- Explore “lessons learned” by the local evaluation team
- Present results and analysis of the individual and aggregate grantee communities funded in that cohort





Topics Covered During Close Out Visits

- Logic models
- Use of data for sustainability
- Local data dissemination efforts
- Local & national data
- Recruitment and retention
- Community buy in
- Family and youth involvement
- Data quality
- Special studies



Communities Visited

- Broward County, FL
- Choctaw Nation, OK
- El Paso County, TX
- Glenn County, CA
- Idaho
- Oklahoma
- San Francisco, CA
- Chicago, IL
- Colorado
- Fort Worth, TX
- Guam
- New York City, NY
- Puerto Rico
- Southwest Missouri





Logic Models

Facilitators:

- Conceptualized the program
- Articulated the flow of services, goals, and objectives
- Created vision and framework for future development
- Created buy-in from staff, families, clinical staff, and other agency staff when they were included in the development

Challenges:

- Difficult to maintain when key project positions experienced turn-over
- Development during planning year was difficult when some staff positions were still being hired
- Progress towards broad goals and outcomes were difficult to measure
- Limited utility when not regularly updated



Program Sustainability

Facilitators:

- Building infrastructure early
- Engaging community partners in sustainability planning from the beginning (Child Welfare, Juvenile Justice, Schools, Courts)
- Making system of care services Medicaid reimbursable
- Infusing system of care values and principles into all child serving agencies and organizations
- Understanding and using evaluation data
- Unified MIS system

Barriers:

- Fragmented understanding of grant requirements
- No comparison group data
- Competition for local funding

Data Dissemination

Facilitators:

- Strong relationship between program and evaluation
- Providing data in a variety of formats to a best suit stakeholders needs
- Collaborations with other partners who were the sole source of pivotal data (education, juvenile justice, child welfare)
- Dedicated staff to develop materials for publications and presentations
- Family members designing/reviewing materials to maximize buy-in
- Linking national and local evaluation data to gain broader understanding of community context, needs, and successes

Barriers:

- Not having a coordinated data dissemination plan
- Little documentation of early planning process
- Limited staffing resources



Evaluation Recruitment & Retention

Facilitators:

- Having family members introduce the study and explain the evaluation
- Employing racially and culturally diverse interviewers
- Building rapport and trust between interviewers, caregivers, and youth
- Gathering multiple contacts for each caregiver and youth
- Staying in contact with families and youth in between interviews
- Branding the program and evaluation
- Flexibility in scheduling interviewers
- Low turnover among interview staff
- Compensation of interviewers for both time and travel expenses
- Creative incentives for caregivers and youth
- Using an evaluation coordinator position to provide central oversight to interview staff
- Refresher training of interview staff at regular intervals



Evaluation Recruitment & Retention

Barriers:

- Families experiencing crisis at intake
- Highly mobile population
- Supporting family members as interviewers
- Lack of communication between clinical staff and evaluation staff
- Large geographic areas
- Length of interview package
- Accessing family members or youth who were in jail or other out of home placements
- Long follow-up period



Community Buy In

Facilitators:

- Involving a wide array of child serving agency staff beyond mental health to incorporate a variety of perspectives
- Incentivize trainings / workshops
- Training on evaluation purpose, function, and utility of data collection
- Building strong personal relationships with partner agency staff
- Reporting evaluation data at regular intervals and asking for guidance in interpretation
- Strong and consistent involvement of evaluation staff in program activities



Community Buy In

Barriers:

- Turnover in staff positions
- Lack of knowledge of evaluation activities
- Lack of understanding of evaluation data
- Changes in political leadership
- Programs being housed within the community mental health system / agencies
- No comparison group, all self-report data, and small sample size in the longitudinal outcome study limited utility of data



Family and Youth Involvement

Facilitators:

- Involving family members in designing the service array gave credibility to program with newly enrolled families
- Reporting aggregate level evaluation findings to family members and requesting assistance in interpretation
- Providing a variety of roles for family members
- Partnering with or creating a family support organization
- Identifying natural leaders among family members
- Training family members to understand evaluation language and concepts
- Providing stipends, transportation, childcare, and flexible meeting times
- Implementing truly collaborative treatment planning
- Providing child level progress reports to demonstrate progress and areas for improvement



Family and Youth Involvement

Barriers:

- Stigma around mental health issues
- Families and youth experiencing crisis and instability
- Lack of understanding of evaluation data
- Limited funding available to support family member and/or youth involvement
- Age of youth at early childhood sites
- Negative past experiences with child serving agencies
- Stereotypes



Data Quality

Facilitators / Barriers:

- Recruiting and maintaining stable data collection staff who were empathetic to families dealing with mental health issues and who were dedicated to system of care values and principles
- Training data collection staff to review interview packages for completeness
- Use of national evaluation tools (e.g. ICN, Data Issue Reports) to monitor data collection processes
- Regular meetings between data collection staff and lead evaluation staff
- Use of a systematic approach to recruiting and retaining families and youth in the longitudinal outcomes study
- Cross training of data collection and data entry staff members to demonstrate importance of each role
- Use of a single data manager position to be responsible and accountable for data quality
- Decision log book used to consistently apply interviewing protocol



Service and Cost Data

Facilitators:

- Establishing MOU/MOAs early with partner agencies
- Early initial plan to collect service and cost data
- Single unified MIS system
- Showing cost savings and cost offsets

Barriers:

- Ambiguous language in RFP
- Not including release language for cost information in consent forms
- Lack of initial interest in collecting service and cost information
- Inadequate and spotty data collection systems
- Inability to share cost information among different child serving agencies



Common Themes

- Impact of staff turnover
- Impact of training
- Time intensive nature of engagement- whether program or evaluation
- Relationships
- Communication
- Integration of evaluation at all levels
- Impact of crisis on populations of focus and staff
- Negative stereotyping based on past experience



Next Steps

- Conduct 7 close out site visits in 2009 and 4 close out visits in 2010
- Combine and compare lessons learned from each wave of close out visits
- Webinar of lessons learned for communities funded in since 2005 in the fall of 2009

