# SEMI-ANNUAL PROGRESS REPORT COVER SHEET

- 1. Grant Number: \_03150-5299\_
- 2. Grantee Name and Address: <u>Vermont Child Health Improvement Program, University of Vermont</u> <u>College of Medicine, St. Josephs 7, UHC Campus, One South Prospect</u> <u>Street, Burlington, VT 05401</u>\_\_\_\_\_
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- 4. Project Title: \_Evaluating Vermont's Youth in Transition (YIT) Grant\_\_\_
- 5. Period of Performance: \_\_\_\_July 1, 2009\_\_\_\_ through \_Dec. 31, 2009\_\_\_\_\_
- 6. Approved Project Period: <u>July 1, 2009</u> through <u>Dec. 31, 2009</u>
- 7. Period Covered by Report: \_July 1, 2009 through Dec. 31, 2009\_\_\_\_\_
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- 9. Date of report: \_2/4/2010\_\_\_\_\_
- 10. Comments (if any):

# Major Activities and Accomplishments

The VCHIP YIT evaluation team has had several major activities and accomplishments during the July – December 2009 reporting period. Chief among these has been the finalization of the YIT evaluation plan, submission of an extensive IRB application to the UVM IRB, and the provision of support to regions' efforts and planning for data collection.

The YIT evaluation plan that we designed has three main components: the Common study, the Vermont study, and the National study. Pilot testing and training regions on these studies began in September. To design the studies, particularly the Common and Vermont components, we conducted thorough background research; modified existing and created new data collection tools; consulted with community members and colleagues in design; and conducted extensive pilot testing. The final version of the data collection tools and procedures are still being reviewed by the UVM IRB, although we anticipate no further requests for revisions and are awaiting final approval.

Finally, the evaluation team has conducted considerable outreach and training with the 12 mental health agencies that will be implementing systems of care and collecting the data. We have helped the agencies make progress towards being able to collect YIT data for all three studies and are continuing to work with them closely.

#### **Problems**

Two major problems we have encountered include a prolonged timeline for obtaining IRB approval and some difficulty in engaging young adults in the development of data collection materials and procedures. In terms of IRB approval, we submitted a thorough application in September of 2009, and that reflects 100s of hours spent on developing tools, consent forms, and very detailed procedures for data collection. The final application document exceeded 100 pages in length. After an initial review by the full IRB committee, we received extensive feedback about changes that the IRB wanted to see, including a request to develop a detailed set of protocols for dealing with data collection challenges and risks, such as when young adults might become violent during testing sessions or express suicidal thinking. Over the following six weeks, we researched and then developed the risk protocols, made major adjustments to our consent processes and forms, and produced a comprehensive response to the IRB's concerns. We are currently awaiting final approval of our protocol.

Regarding engaging young adults around evaluation issues, since holding an initial very successful "E-Team" (evaluation advisory group) meeting in July, we have attempted to hold three more meetings with only mixed results and low attendance by young adults, although adult participation has been very strong. We have tried to modify how we recruit and retain people onto the E-Team, including holding meetings at different locations and different times of the day and holding a phone meeting. We are currently exploring new means of engaging young adults for the YIT evaluation, including visiting the Spectrum Drop-In center and using Facebook.

# Significant Findings and Events

We have not had any significant changes in staffing or how we have been doing our work since July 2009. We continue to have a very energetic, cohesive team. Our main focus and the main use of our time has been in finalizing the data collection tools and methods and supporting the regions in ramping up for the evaluation.

#### **Dissemination activities**

To date we have not disseminated any of the materials we have developed. We have developed interesting materials for the regions to use in recruiting and retaining young adults and caregivers for the evaluation, but these are pending final IRB approval. We have also developed (and are continuing to refine) what is essentially an evaluation manual that is being shared with each of the participating regional mental health agencies.

#### **Other Activities**

In addition to developing tools and procedures and the IRB materials, we successfully hosted the MACRO evaluation site visit in August; sent two members of our team to the national Systems of Care meeting in Anaheim, CA in July; hosted four E-Team meetings; conducted trainings and coordination meetings with staff from the Department of Mental Health around ASEBA data collection and data sharing; and developed internal policies and procedures for how the evaluation is being conducted (e.g., how we interact with staff from the regions, financial and personnel policies, division of labor, etc.). Finally, we have also made considerable progress towards having a Microsoft Access database that will support our data management and reporting needs, including transmission of data to MACRO and the Federal funding agency.

## Activities Planned for Next Reporting Period

For the period of January through June 2010, we will conduct additional training and technical assistance work with the 12 regions and begin data collection for all three studies. Due to the complexity of the data collection tools and procedures, we anticipate that a significant amount of our time and effort will be spent supporting data collection and transmission with the staff at the regional agencies. We will also begin transmitting required data to MACRO and the Federal TRAC web sites. Finally, we will work with the state Operations and Outreach team and other partners to refine other aspects of the YIT evaluation, including establishing a plan to provide data back to the regions and state team and finalizing a quality improvement plan.