

YIT PROGRAM PROGRESS REPORT

1. Grant Number: 03150-7074
2. Grantee Name and Address:

UVM VCHIP
1 S. Prospect St,
Burlington, VT., 05405
3. Telephone Number: 802-656-9192
4. Project Title: Evaluation of the Vermont Children's Mental Health Initiative
5. Period of Performance from 1/1/2011 through 6/30/2011
6. Approved Project Period from 1/1/2011 through 6/30/2011
7. Author's Name and Telephone number: Thomas Delaney, 802-656-9192
8. Date of report: 8/14/2011
9. Comments (if any):

The federal Government Performance and Results Act (GPRA) primarily focuses on demonstrating accountability and achieving meaningful outcomes for all federally funded programs. Please make sure to include information on the outcomes of your project activities and the impact of your project on improving the lives of Youth in Transition and their families in the Program Progress Reports submitted.

Two Program Progress Reports must be submitted for this sub-grant:

1. one for the time period from July 1 – December 31, 2011 (due by January 31, 2012), and
2. one for the period from January 1 – June 30, 2012 (due by July 30, 2012).

Report Contents

1. Major Activities and Accomplishments During this Period

Report both quantifiable and non-quantifiable accomplishments from Attachment A (see pages 3-8 of the grant award):

- Quantifiable accomplishments include numbers of youth/families served, people trained, support groups established, etc.
- Non-quantifiable accomplishments should be listed in chronological order. Describe any draft/final products in this section.

Quantifiable accomplishments related to the evaluation of the effectiveness of the Vermont System of Care for young adults with SED include:

1. A total of 232 young adults enrolled in one of the three component studies of the evaluation to date (from April 2010 through June 30, 2011), including:
 - 232 enrolled in the Common Study, which includes measures for NOMS and EDIF reporting requirements to TRAC and ICF MACRO,
 - 79 enrolled in the National Study, which is the National Outcome Study that is designed by and reported back to ICF MACRO, and
 - 52 enrolled in the Vermont Study, which is the local evaluation.
2. In addition to the above, we have collected data using the Study Inclusion Criteria Checklist (SICC), that functions as a measure for the total number of young adults who have been encountered by YIT staff and professionals and subsequently evaluated for whether or not they are eligible for participation in one of the studies. The SICC thus functions as a proxy for a denominator of all the young adults encountered by the System of Care workers. As of June 30, 2011, a total of 304 SICC forms have been collected.

Non-quantifiable accomplishments during the reporting period include:

1. Providing continued support and coaching to all 12 regional System of Care communities about their recruitment, data collection and data submission efforts, including providing new forms and procedures as needed due to required changes by the UVM Institutional Review Board and ICF MACRO.
2. Participation in a statewide series of State Operations Team site visits that focused strongly on communities' efforts to increase their enrollment of young adults into the YIT evaluation.
3. Creating the data Dashboard distributed in January 2011 and a significantly revised Dashboard distributed in May, 2011 (see Attachments A and B respectively, and description under Dissemination Activities)
4. Creating/adapting new versions of two existing TIP assessment tools: the *Self Study of TIP Implementation—Guidelines* and the *Self Study of TIP Implementation—Organization and Structure* (Attachments C and D, respectively). These tools were administered (the *Guidelines* tool as a structured interview, the *Organization and Structure* tool as self report) and completed by representatives from a total of 18 Vermont System of Care organizations; these findings were summarized, shared back with the organizations and are being used as the baseline for a study of how organizations are implementing changes as part of their TIP training.
5. Having two proposals accepted for presentation, and then presenting them, at the National System of Care Research Meeting in Tampa in March, 2011 (Attachments E and F, and see Dissemination Activities).
6. The evaluation team being selected to receive a 2011 Excellence in Evaluation award (at the silver level, in the operations category) based on the effectiveness of the data collection tools and systems, as well as the data management system, we have developed for the YIT grant.

Please report major activities and accomplishments for the following goal and indicators as relevant for the sub-grant. *[This section of the report may be entered directly into the table below.]*

Goal for strengthening the systems of care	6: Effectiveness of the Vermont System of Care for young adults with SED is evaluated.....
System of Care Infrastructure Indicators (for federal TRAC):	<u>Workforce Development:</u> Organizations or communities implementing mental health-related training programs as a result of the grant. Please enter the number of organizations or communities and briefly describe the training programs....
	<u>Organizational Change:</u> Organizational changes made to support improvement of mental health-related practices/activities that are consistent with the goals of the grant. Please enter the number of changes and briefly describe them....
	<u>Partnership/Collaboration:</u> Organizations that entered into formal written inter/intra-organizational agreements (e.g., MOUs/MOAs) to improve mental health-related practices/activities that are consistent with the goals of the grant. Please enter the number of organizations and briefly describe the agreements....
	<u>Types/Targets of Practice:</u> Programs/organizations/communities that implemented evidence-based mental health-related practices/activities as a result of the grant. Please enter the number of programs/organizations/communities and briefly describe the evidence-based practices....

2. Problems

Describe any deviations or departures from the original project plan including actual/anticipated slippage in task completion dates, and special problems encountered or expected. Use this section to describe barriers to accomplishment, actions taken to overcome difficulties, and to advise DMH of any needs for assistance.

There are two challenges that the YIT evaluation has encountered during the reporting period. In the first, the UVM IRB determined that six of the eight consent forms we were using were not correct, and this resulted in the evaluation having stop recruitment into the Vermont and National Studies for approximately 4 weeks. During this period, there may have been 10-15 potential enrollees into the evaluation that we were not able to approach for recruiting into those studies. This issue was resolved to the satisfaction of the IRB and the YIT evaluation team, and to date, no additional delays in recruitment or problems with any forms have occurred.

The second challenge reflects a longer term and more persistent problem, which is the relatively slow pace and low numbers at which some of the 12 regions have recruited eligible young adults into the common study, and then referred these individuals to the YIT evaluation for subsequent recruitment into the Vermont or

National studies. This issue continues to be addressed on a region by region basis, since not all regions are lagging, and since the issues they are facing regarding recruitment differ across regions. One helpful intervention was a series of Operations Team (including representatives from the evaluation team) to all of the regions, that focused strongly on recruitment issues, and that started last fall and continued through the spring of 2011. In several cases, these visits triggered an increase in referrals to the Vermont and National studies. The evaluation team continues to conduct a great deal of outreach to regions on this issue, and it should be noted that while almost all regions that were lagging in the first half of 2011 have shown progress, other regions' recruitment efforts have slowed, prompting additional attention from the evaluation team and renewed efforts. High levels of staff turnover in several regions has been a significant contributor to this problem.

3. Significant Findings and Events

For special notice to Principal Investigator, State Outreach Team for Youth in Transition, Federal Project Officer, etc. This should include any changes in staffing, including of persons, time spent, and/or responsibilities. Attach resumes and qualifications of new staff.

The evaluation team currently includes 4 interviewers who on average range in their interviewing-related work time between 4 and 20 hours per week. To increase our interviewing capacity, in late June 2011 the team hired a fifth interviewer with the intent of her working up to 20 hours per week after an initial training period. The individual who was hired, however, ran into serious scheduling difficulties during the training period, and was let go. Since then, a potential new part-time (up to 20 hours per week) interviewer has been identified and we hope to bring her on for training starting in late July/early August 2011.

4. Dissemination activities

Briefly describe project related inquiries and information dissemination activities carried out over the reporting period. Itemize and include a copy of any newspaper, newsletter, and magazine articles or other published materials considered relevant to project activities, or used for project information or public relations purposes.

During the period covered by this report, the YIT evaluation team has shared findings from the evaluation in several ways, including:

- 1) In February and then in May 2011, sharing a state-level data Dashboard, via the YIT grant project director's email list and directly with communities (Attachments A and B, respectively). Each two page report presents a representative "story from the field" about a young adult's experience in the System of Care, along with key indicators including the communities' enrollment activities, indicators relating to the strengths and overall functioning of young adults in the evaluation, and indicators for each of the eight outcome domains for the grant.**

- 2) Presenting initial findings from the YIT evaluation at the National System of Care Research Meeting in Tampa in March, 2011. These presentations summarized: 1) findings from the *Access and Barriers* data collection tool (Attachment E) relating to young adults' reported barriers and facilitators to engaging in important aspects of their lives, and 2) findings from the *Young Adult Strengths Questionnaire* (Attachment F), specifically the reliability properties of the overall tool and four scaled scores corresponding to four strengths domains.
- 3) One-on-one meetings with staff and leaders from the 12 system of care communities, in which the evaluation team shared enrollment data and then worked collaboratively on identifying strategies and setting goals for increasing enrollment in the System of Care evaluation.

5. Other Activities

Briefly describe other activities undertaken during the reporting period.

Other activities undertaken during the reporting period include:

- Attending the System of Care Research meeting in Tampa (March, 2011),
- Evaluation team members participating in all state-team Operations meetings, and
- Working with Mercedes Avila, the YIT cultural/Linguistic Competence Coordinator, to assist her in evaluating the effectiveness of her training activities.

6. Activities Planned for Next Reporting Period

Briefly describe the project activities planned for the next reporting period.

1. Development and dissemination of two new data Dashboards, to be shared in late summer and late fall, 2011, that will build off of previous Dashboards and incorporate new longitudinal findings from the National and Vermont studies.
2. Presentation of a more comprehensive and region/organization specific report on the TIP baseline assessments, to be used by communities in planning their next steps for improving their Systems of Care (e.g., by helping them focus on self-identified needs around Cultural/Linguistic Competence or strengthening Youth Leadership in the System of Care)
3. Completion of the focus group study, which to date has been conducted in 10 of the 12 communities, and subsequently developing overall and community-specific reports about young adults' perspectives on youth/young adult involvement and their reported barriers & facilitators to accessing system of care services.

- 4. Development of at least one manuscript that describes the effectiveness of the Vermont System of Care in an area such as self-reported changes in strengths/protective factors, increasing youth guided aspects of the System of Care or young adults' access to healthcare services during their involvement with the System of Care.**